

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

APPROVED
 AND
 FILED

1997 MAR -3 PM 3:00

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # 95000075537

1. Corporation Name
 Sunsation Tanning Products Inc.

Principal Place of Business Mailing Address
 Sarasota, FL 4539 Northgate Ct.
 Sarasota, FL 34234

700002104207--5
 -03/04/97--01120--013
 ****365.00 ****365.00

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 4539 Northgate Ct. Suite, Apt. #, etc.		3. New Mailing Office Address, If Applicable 4539 Northgate Ct. Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 10-2-95	
City & State Sarasota, FL		City & State Sarasota, FL		5. FEI Number 65-0611522	
Zip 34234	Country US	Zip 34234	Country US	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PA	Daniel Traynor	4539 Northgate Ct	Sarasota, FL 34234
T	Daniel Traynor	4539 Northgate Ct	Sarasota, FL 34234
S	Daniel Traynor	4539 Northgate Ct	Sarasota, FL 34234
VP	Henry Traynor	4539 Northgate Ct	Sarasota, FL 34234

8. Name and Address of Current Registered Agent

Daniel Traynor
 4539 Northgate Ct.
 Sarasota, FL 34234

9. Name and Address of New Registered Agent

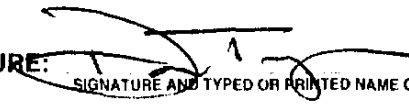
Name		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, Etc.		
City	State FL	Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent  REGISTERED AGENT MUST SIGN Date 2-28-97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 2-28-97 Daytime Phone # 941-355-7818

CR2040 (12/96)

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Sunsation Tanning Products Inc.
4539 Northgate Ct.
Sarasota, Fl 34234
Feb 28, 1997

To whom this may concern,

I never received notice of the corporation being dissolved due to the fact that the corporation had been relocated when this letter was sent. As per the conversations I had with you up there, you requested in writing this letter signifying that this had occurred and you had told me that the total amount of \$365.00 should be enclosed for processing. The check is enclosed and please call me if there is any problem because we are in a rush to resolve this as soon as possible. Thankyou.

Daniel H. Traynor