PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

97 DEC 26 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000083334

1. Corporation Name

AMWELL CORPORATION, INC.

Principal Place of Business	Mailing Address
~~1327 25TH ST~~ 647 W. SOUTH ST ORLANDO FL 32805 ~~US~~ ORLANDO FL, 32805	~~1327 25TH ST~~ PO BOX 1044 ORLANDO FL 32805 ~~US~~ WINDERMERE FL. 34786-1044

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

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
647 WEST SOUTH ST	PO BOX 1044
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO FL	City & State: WINDERMERE FL.
Zip: 32805 Country: U.S.A.	Zip: 34786-1044 Country: U.S.A.

4. Date Incorporated or Qualified To Do Business In Florida: 10/26/1995

5. FEI Number: 59-3341552 — Applied For ☐ Not Applicable ☑

6. CERTIFICATE OF STATUS DESIRED ☐ $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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DPST	BRIDGE, WHITTAKER	~~1327 25 STREET~~ 647 WEST SOUTH ST	ORLANDO FL 32805
			500002384905--7 -12/29/97--01123--020 ****750.00 ****750.00
			REINSTATEMENT 1997
			A Ayers 12/26/97

8. Name and Address of Current Registered Agent

BRIDGE, WHITTAKER
1327 25TH ST
ORLANDO FL 32805

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable) N/A

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 _____ Date 12-19-97

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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: _____ WHITTAKER BRIDGE 12-19-97 407-925-3034

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E040 (8/97)