PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 MAR 14 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000000219

1. Corporation Name
BJT ENTERPRISES, INC.

2. Principal Office Address	**3.** Mailing Office Address
10859 EMERALD COAST PKWY W.	10859 EMERALD COAST PKWY W.
Suite, Apt. #, etc.: STE 204	Suite, Apt. #, etc.: STE 204
City & State: DESTIN FL	City & State: DESTIN FL
Zip: 32550 Country: WALTON	Zip: 32550 Country: WALTON

4. Date Incorporated or Qualified To Do Business in Florida: 2 JAN 1996

5. FEI Number: 59-3351649 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: JAMES H. TANNER
300003892023--4
-03/22/01--01019--010
****900.00 ****900.00
Street Address (P.O. Box Number is Not Acceptable): 10859 EMERALD COAST PKWY W.
Suite, Apt. #, Etc.: STE 204
City: DESTIN State: FL Zip Code: 32550

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: James H Tanner (REGISTERED AGENT MUST SIGN) Date: 3/12/01

CR2E081 (9/00)

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	JAMES H. TANNER	1497 E. NURSERY Rd	SANTA ROSA BEACH, FL 32459
VP	BARBARA A. TANNER	1497 E. NURSERY Rd	SANTA ROSA BEACH, FL 32459

REINSTATEMENT 00-01 T8

10. 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: James H Tanner (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) 3/12/01 (Date) (850) 837-6011 (Daytime Phone #)