PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
97 NOV 17 PM 1:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000028962**

1. Corporation Name

IT'S JUST LUNCH , INC.

Principal Place of Business	Mailing Address
C/O LEXIS DOCUMENT SERVICES 3953 W.W. KELLEY ROAD TALLAHASSEE FL 32311	C/O LEXIS DOCUMENT SERVICES 3953 W.W. KELLEY ROAD TALLAHASSEE FL 32311

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

REINSTATEMENT 97

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc. 1401 Brickell #450
City & State MIAMI FL
Zip 33131 Country USA

3. New Mailing Office Address, If Applicable

c/o IJL Holdings
Suite, Apt. #, etc. 432 N. Clark #400
City & State Chicago IL
Zip 60610 Country USA

4. Date Incorporated or Qualified To Do Business in Florida 04/03/1996

5. FEI Number 59-3372766 Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED X $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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
~~P~~ C	MCGINTY, ANDREA	~~101 WEST GRAND AVENUE, SUITE 502~~ 432 N. CLARK ST. #400	CHICAGO IL 60610
P	Daniel G. Dolan	432 N. Clark St. #400	CHICAGO IL 60610

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11-18-97

8. Name and Address of Current Registered Agent

LEXIS DOCUMENT SERVICES, INC.
C/O LEXIS DOCUMENT SERVICES
3953 W.W. KELLEY ROAD
TALLAHASSEE FL 32311

9. Name and Address of New Registered Agent

Name: Daniel G. Dolan
Street Address (P.O. Box Number is Not Acceptable): 1401 Brickell ~~#450~~
Suite, Apt. #, Etc.: 450
City: Miami State: FL Zip Code: 33131

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 11/10/97

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: _____ 11/10/97 312-644-9470
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E040 (8/97)