

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		03 OCT -8 AM 8:31 SECRETARY OF STATE TALLAHASSEE FLORIDA	
DOCUMENT # P96000032054 1. Corporation Name NATIONAL FLEET SALES OF FLORIDA, INC.					
2. Principal Office Address 1901 W. 1st Street		3. Mailing Office Address 1901 W. 1st Street		REINSTATEMENT 300023640268 03 10/08/03--01020--001 **150.00	
Suits, Apt. #, etc.		Suits, Apt. #, etc.			
City & State Sanford, FL		City & State Sanford, FL			
Zip 32771		Country US			
4. Date Incorporated or Qualified To Do Business in Florida 04/12/1996		5. FEI Number 59-3372523		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 Couts, Joyce E.					
Street Address (P.O. Box Number is Not Acceptable) 304 Sweetwater Blvd. North					
Suits, Apt. #, Etc.					
City Longwood					
State FL					
Zip Code 32779					
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 <u><i>Joyce E. Couts</i></u> Date <u>10/6/03</u> REGISTERED AGENT MUST SIGN					
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		
PS	Couts, Joyce E.	304 Sweetwater Blvd. North	Longwood, FL 32779		
VT	Couts, Ronald E.	304 Sweetwater Blvd. North	Longwood, FL 32779		
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: <u><i>Ronald E. Couts</i></u> RONALD E. COUTS Date <u>10/6/03</u> 407-302-9711 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2381 (10/02)

71 10/6/03

NATIONAL FLEET SALES OF FLORIDA, INC.
1901 W. 1st Street
Sanford, Florida 32771

October 6, 2003

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: Reinstatement of National Fleet Sales of Florida, Inc.
Document #P9600J032054

Dear Sir or Madam:

Enclosed is a Corporation Reinstatement form and this corporation's check in the amount of \$150.00 payable to the Florida Department of State. We did not receive the 2003 Uniform Business Report for National Fleet Sales of Florida, Inc. and ask that you waive the \$600.00 reinstatement fee that would otherwise be due.


Ronald E. Coutts, Vice President

Enclosures