

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000033702

1. Corporation Name

Marquesa Rock enterprises, Inc.

Principal Place of Business

1016 Howe Street
Key West, FL 33040

Mailing Address

REINSTATEMENT**FILED**

98 MAR -3 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000002445230--2

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

4. Date incorporated or Qualified
To Do Business in Florida
6/24/96

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

☒ Applied For☐ Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐If the address is changed, please
attach a certificate of change.

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
P/D	David Linn	1016 Howe Street	Key West, FL 33040
S	Andrea May	1016 Howe Street	Key West, FL 33040
T	Paulette Linn	1016 Howe Street	Key West, FL 33040

8. Name and Address of Current Registered Agent

Amerilawyer Chartered
343 Almeria Avenue
Coral Gables, FL 33134

9. Name and Address of New Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
Suite, Apt. #, Etc.City
TallahasseeState
FLZip Code
32301

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.

Signature of
Registered Agent

Deborah D. Skipper As agent

REGISTERED AGENT MUST SIGN

Date 3-3-98

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rick Lightner

3/2/98

Date

305-292-9899

Daytime Phone #



ACCOUNT NO. : 072100000032

REFERENCE : 724317 1022A

AUTHORIZATION :

Patricia Pizante

COST LIMIT : \$ 900.00

ORDER DATE : March 2, 1998

ORDER TIME : 9:47 AM

ORDER NO. : 724317-005

CUSTOMER NO: 1022A

CUSTOMER: Joseph D. Allen, Esq
Joseph D. Allen, Esq
617 Whitehead Street

Key West, FL 33040

DOMESTIC FILINGS

NAME: MARQUESA ROCK ENTERPRISES,
INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cindy Harris

EXAMINER'S INITIALS _____

DIVISION OF CORPORATION

98 MAR -3 AM 10:41

RECEIVED

2