... FAX ... 3146 PRODUCT DEVELOPMENT 001

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
98 NOV 23 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****750.00 ****750.00

REINSTATEMENT 98

DOCUMENT # P96000056843

1. Corporation Name
American Future Value Corporation

Principal Place of Business	Mailing Address
7445 Carriage Side Court Jacksonville, FL 32256	Same

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
Suite, Apt. #, etc. N/A	Suite, Apt. #, etc. N/A
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 7/5/1996

5. FEI Number: 59-3394648 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 (Additional Processing Fee Required)

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
President Treasurer & Director	Ricardo Mejias	7445 Carriage Side Court	Jacksonville, FL 32256
Secretary	Berta Mejias	7445 Carriage Side Court	Jacksonville, FL 32256

8. Name and Address of Current Registered Agent

Ralph B. Fisher
18125 Highway 41 N Suite 109
Lutz, FL 33549

9. Name and Address of New Registered Agent

Name: Sally J. Kircher
Kircher & Vail, P.A.
Street Address (P.O. Box Number is Not Acceptable): One Independent Drive
Suite, Apt. #, Etc.: Suite 3303
City: Jacksonville
State: FL Zip Code: 32202

GR2EO40 (1998)

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: Sally J. Kircher Date: 11/4/98
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: _____ 11-4-1998 (904) 982-2169
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #