

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 DEC 28 PM 1:13

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12/28/04 14:01:42 S03 ***0189A 00

DOCUMENT # P96000098517

1. Corporation Name

BURTON HOLDINGS, INC.

6619 South Dixie Hwy #222

6619 South Dixie Hwy #222

2. Principal Office Address

6619 South Dixie Hwy #222

Suite, Apt. #, etc.

3. Mailing Office Address

6619 South Dixie Hwy #222

Suite, Apt. #, etc.

City & State

South Miami, FL

City & State

South Miami, FL

Zip

33143

Country

USA

Zip

33143

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 12/05/1996

5. FEI Number

65-0769079

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 02-04

7. Name and Address of Current Registered Agent

Name

Zachary H. Burton

Street Address (P.O. Box Number is Not Acceptable)

6619 South Dixie Hwy #222

Suite, Apt. #, Etc.

City

South Miami, FL

State

FL

Zip Code

33143

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

[Signature]

Date 9/23/04

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
Pres.	Zachary H. Burton	6619 South Dixie Hwy #222	South Miami, FL 33143
VP	Zachary H. Burton	6619 South Dixie Hwy #222	South Miami, FL 33143
Treas	Zachary H. Burton	6619 South Dixie Hwy #222	South Miami, FL 33143

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)(f), 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] Zachary H. Burton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/23/04

Date

888-382-8786

Daytime Phone #

CR2E081 (01/04)