PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM ROVED FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham **FOR** Secretary of State

REIN	ISTATEMENT ***	Ď	IVISION OF CORPO	PRATIONS		37 R	ink 17 EMIS: 34	
1. Corpore	UMENT # P96000 ation Name AYAN MINING CORP.)10024	12			SECF TALLA	RETARY OF STATE MASSEE, FLORIDA	
Principal Place of Business 227 NW 33RD ST MIAMI FL 33127 If above addresses are incorrect in any way, line th		Mailing Address 227 NW 33RD ST MIAMI FL 33127 rough incorrect information and enter correction belo						
2. New Principal Office Address, If Applicable		New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Fforida 12/11/1996			
Sulte, Apt. #, etc.		Sulto, Apt. #, etc.			5. FEI Number Applied For			
City & Stat	le	City & State			6.5-0	07/250	1 09 Not Applicable	
Zip	Country	Zip	Count	ry		E OF STATUS DESIRED	\$8.75 Additional Fee require for a Certificate of Status	
7. Names Title(s) 1 PD	1			reet Address of Eac fficer and/or Directo Isc Post Office Box				
STD	RODRIGUEZ, SANDRA L	÷	227 NW 33RD S			MIAMI FL 33127		
					OC	100023 -11/19/3 ****750	521305 ?-01089-004 .00 ****750.00	
		÷		M	11/18			
	B. Name and Address of Current	Registered Age	 	<u></u>	9. Name and A	Address of New Reg	istered Agent	
RODRIGUEZ, SANDRA L 227 NW 33RD ST MIAMI FL 33127				Suite, Apt. #, Etc		O. Box Number is Not Acceptable)		
				City			State Zip Codo	
10. I, being Signature o Registered	Agent	Do	oration, am familiar w Description ENT MUST SIGN	vith and accept the c	bligations of Secti	on 607.0505, F.S.	110/97	
	is corporation owes or he			ar Yes 🄀	No \square	(Soc e	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 filling 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 eath.

SIGNATURE: