

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Tiffany mail Inc

2. Principal Office Address

7528 Oleander Gate Drive

Suite, Apt. #, etc.

2013

City & State

NAPLES FL

Zip

33942

Country

NAPLES

3. Mailing Office Address

1606 Henry Rd

Suite, Apt. #, etc.

City & State

WATKINS NY

Zip

11793

Country

NASSAU

4. Date Incorporated or Qualified
To Do Business in Florida

2/15/97

5. FEI Number

65-0746693

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

CARMINE MARCINO

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

7528 Oleander Gate Drive

Suite, Apt. #, Etc.

2013

City

NAPLES

State

FL

Zip Code

33942

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]

REGISTERED AGENT MUST SIGN

Date

2/14/01

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 | MARCO CARMINE | 7528 Oleander Gate Drive | NAPLES FL 33942 |
| | | | |
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/14/01

Daytime Phone #

516-826-8168

CR2E081 (9/00)

**A & F CONSULTING SERVICES INC
1606 HENRY ROAD
WANTAGH, NY 11793
516-826-8168**

January 17, 2001

**Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314**

**Re: Platinum Promotions, Inc. and
Tiffany Mail, Inc.
EIN: 65-0612273 & 65-0746693
Corporation Reinstatement**


Gentlemen:

Please be advised that I am the accountant for the above two corporations. We have been filing all forms on a timely basis, except the Department of Corporations form. This was through no fault of our own, we never received the form. It was mailed to the wrong address, and returned to the Department of State.

Platinum Promotions, Inc. mailed in their check without the form and are current. I am enclosing a check for \$600 for Tiffany Mail, Inc.

Please reinstate the above corporations, and if you have any questions, please feel free to contact me.

Yours Truly


Anthony Avena
platreins