	**** =						
	PLEASE READ PLICATION FOR STATEMENT	FLORID	RUCTIONS A DEPARTMEN Sandra B. Mor Secretary of S IVISION OF CORPOR	NT OF STATE tham state	7	ING THIS FORM.	<u> यहाँ केंद्र</u> 28
DOCUMENT # P97000017064						98 NOV 24 PH 1:42	
1. Corporation Name AFFORDABLE/NORTHGATE, INC.						SECHETANY LA STATE TALLAHASSIE, FLORIDA	
Principal Place of Business Mailing Address							
405-F ATLAN		fis road Feral FL 32920	-				
	addresses are incorrect in any way, line t		nformation and entering Office Address, If		4 Date Incorp	orated or Qualified	<u> </u>
Suite, Apt. #, etc. Suite, Apt. #					To Do Busin	orated or Qualified ness in Florida 02/24/19	
City & State City & S			 		59.0	3439918	Applied For Not Applicable
Zip	Country	Zip	Country	,	6. CERTIFICATI	E OF STATUS DESIRED 🔯 \$8.75 Addition	tional Fee required lificate of Status
7. Names a	nd Street Addresses of Each Officer and/or Director (Florida nonprofination of Officers and/or Directors 3 (Do			ations must list at least 3 directors) reet Address of Each fficer and/or Director se Post Office Box Numbers)		City / State / Zip	
D V	STRAKA, CHRISTOPHER J	405-F ATLANTIS ROAD			CAPE CANAVERAL FL 32920	5Tes	
P	BAILEY, HELEN	405-F Atlantis Road			Cape Canaveral, FL	32920	
٧	RENTZ, CYNTHIA	405-F Atlantis Road			Cape Canaveral, FL	32920	
TATEMENT 94						\$	
	نه الله مد المعبد بأدر بين	OIAI		()/	1-24		
				1000026956812			
8. Name and Address of Current Registered Agent					9. Name and	Address of New Registered Agent	
STRAKA, CHRISTOPHER J 405-F ATLANTIS ROAD				Name Street Address (P.O. Box Number is Not Acceptable)			
CAPE (CANAVERAL FL 32920	ΛΛ	Suite, Apt. #, Etc		State Zip C	ode	
10. I, being appointed the registered agent of the bove named corporation, am familiar with and accept the signature of					bligations of Sect		
Registered Agent REGISTERED AGENT MUSTISIGN				(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		Date 11.10.90	
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.)							
this rein owed by	that I am an officer or director or the rec istatement application, the reason for dis y the corporation have been paid and the application is true and accurate, and my	solution has beer a names of individ	eliminated, the corpo luals listed on this for	rate name satisfies m do not qualify for	the requirements an exemption un	of section 607.0401 or 617.0401, F.S	., that all fees
SIGNATURE:							
	SIGNATURE AND TYPED OR F	RINTED NAME OF	SIGNING SEPTEER OF	IRE BUNG	<u> </u>	11.16.98 11.23.98	one #



ACCOUNT NO. : 072100000032

REFERENCE: 042587 7120823

AUTHORIZATION

COST LIMIT : \$ 758.75

ORDER DATE: November 24, 1998

ORDER TIME : 10:38 AM

ORDER NO. : 042587-005

CUSTOMER NO:

7120823

CUSTOMER: Ms. Cynthia L. Rentz

Straka & Associates 405-f Atlantis Road

Cape Canaveral, FL 32920

DOMESTIC FILINGS

NAME: AFFORDABLE/NORTHGATE, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS