

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **P97000024515**

1. Corporation Name

SCN CONSULTANTS, INC.

Principal Place of Business

8712 SCENIC OAK COURT
ORLANDO FL 32836

Mailing Address

8712 SCENIC OAK COURT
ORLANDO FL 32836

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/13/1997

5. FEI Number

36-4149822

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	SNELL, LINDA	8200 GEMSTONE COURT 8712 SCENIC OAK COURT	ORLANDO FL 32836
T	SNELL, GRAHAM	8200 GEMSTONE COURT 8712 SCENIC OAK COURT	ORLANDO FL 32836
S	GOLDMAN, LAWRENCE	6306 N. CICERO AVE	CHICAGO IL 60646
			000003045970--5 -11/16/99--01079--001 ***158.75 ***158.75
			18

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GOLDMAN, LAWRENCE A
C/O GRAHAM SNELL

~~8200 GEMSTONE COURT~~ 8712 SCENIC OAK COURT
ORLANDO FL 32836

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

L. Goldman
REGISTERED AGENT MUST SIGN

Date 10/21/99

11. 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

LINDA SNELL

10/22/99

Daytime Phone #

CR2E040 (8-99)

SCN Consultants, Inc.

8712 Scenic Oak Court
Orlando, FL 32836

October 29, 1999

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

2

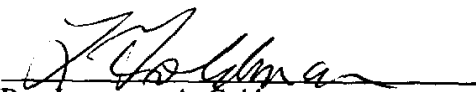
Gentlemen:

Please be advised we are in receipt of your notice of dissolution. With this notice of dissolution, we were assessed a \$ 600.00 penalty for the reinstatement of the corporation. We believe this is unwarranted for the following reasons.

On May 10, 1999 we wrote you a letter, a copy is enclosed along with Articles of Amendment to Articles of Corporation. These Articles of Amendment changed the name of the corporation from NCS Consultants, Inc., to SCN Consultants, Inc. There were also Articles of Amendment of the corporation, which changed the principle office and the registered office of the corporation to 8712 Scenic Court, Orlando, FL 32836. I am enclosing copies of all these amendments. Your computer picked up only the change of the principle office of the corporation and did not pick up the change of address for registered agent. Because this address was not changed, the annual report forms were not received.

In view of the above, it is respectfully requested that the \$ 600.00 reinstatement fee be waived. As per instructions from your department via phone, I am enclosing my check in the amount of \$ 150.00 for the annual fee of the corporation for the upcoming year. I am taking this action in accordance with the verbal instructions received from your department today.

Yours very truly,
SCN Consultants, Inc.


By: Lawrence A. Goldman
Registered Agent