PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUN 29 AM 11:45

DOCUMENT # P97000041105

1. Corporation Name

Standard Advertising Corp.

2. Principal Office Address	**3.** Mailing Office Address
Crosswind Corp./Park	P.O. Box 460
Suite, Apt. #, etc.: Second Floor	Suite, Apt. #, etc.:
City & State: Bridgeport, WV	City & State: Bridgeport, WV
Zip: 26330 Country: USA	Zip: 26330 Country: USA

REINSTATEMENT 00-01

4. Date Incorporated or Qualified To Do Business in Florida: 05-08-07 **SP**

5. FEI Number: 59-344 8632 ☐ 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: R. Reid Haney, Esquire c/o Kalish & Ward

600004478253--7
-07/17/01--01002--005
****900.00 ****900.00

Street Address (P.O. Box Number is Not Acceptable): 101 E. Kennedy Boulevard, Ste 4100

Suite, Apt. #, Etc.:

City: Tampa, State: FL Zip Code: 33602

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: 6/27/2001

CR2E061 (9/00)

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
P-D	Ronald W. Hill	908 Worthington Drive	Bridgeport, WV 26330
V-P-D	Cynthia L. Hill	908 Worthington Drive	Bridgeport, WV 26330
D	James J. Brawley	5001 W. Lemon Street	Tampa, FL 33609

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: James J. Brawley [signature] 06-26-01 813/207-2010

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #