

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Robert Harris

Secretary of State

Division of Corporations

FILED

00 DEC 22 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000048816**
1. Corporation Name
NORTH AMERICAN MOTORS INC.

2. Principal Office Address
1616 N. FLORIDA Mango
SUITE 3-C, W.P. BEACH, FL. 33409
Suite, Apt. #, etc.

3. Mailing Office Address
SAME
Suite, Apt. #, etc.

City & State
W. PALM BEACH, FLA.

Zip **33409** Country
PALM BEACH

City & State

Zip Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0763150

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

AMIE M. CHARITY

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

8165-7th PLACE S.

Suite, Apt. #, Etc.

City

W. PALM BEACH, FL.

State

FL

Zip Code

33411

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

Amie M. Charity
REGISTERED AGENT MUST SIGN

Date **12/20/00**

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
PRES.	AMIE M. CHARITY	8165-7th PLACE SOUTH	W. PALM BEACH, FL.
			33411
			LS

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:

Amie M. Charity
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AMIE M. CHARITY, PRES.

12/20/00

Date

Daytime Phone #

CR2E081 (9/99)

North American Motors, Inc.
1616 N. Florida Mango
W. Palm Beach, Fl. 33409

2012

December 20, 2000

Re: Corporation Reinstatement

To Whom it may concern:

It recently came to my attention that our corporate fees had not been paid. The reason for this happening is that I recently bought the corporation and the forms were sent to the wrong address and returned to your office.

I talked with your office and was told that we could apply for a one time exemption for the corporation as we had no knowledge that the corporate papers were being sent to a different address.

We are at this time asking for the one time exemption and enclosing a check in the amount of \$300.00 which will pay for the year 2000 and 2001. Please inform us if this is acceptable to you. We are also enclosing the Corporation Re-Instatement papers but did not know the Document # and it was left blank.

Respectfully yours,

Amie M. Charity

Amie M. Charity
President