pg. 1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT

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

FILED
00 APR 20 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000070364

1. Corporation Name
BOYD BROTHERS OF PENSACOLA, INC.

2. Principal Office Address	3. Mailing Office Address
2280 N. 9th Avenue	2280 N. 9th Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pensacola, Florida	City & State: Pensacola, Florida
Zip: 32503 Country: USA	Zip: 32503 Country: USA

REINSTATEMENT 98.00

4. Date Incorporated or Qualified To Do Business In Florida: 8-13-97

5. FEI Number: [X] 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: Vincent J. Whibbs, Jr.
Street Address (P.O. Box Number is Not Acceptable): 421 N. Palafox Street
Suite, Apt. #, Etc.:
City: Pensacola State: FL Zip Code: 32501

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 _____ Date 4/18/00

REGISTERED AGENT MUST SIGN

CR2E081 (9/99)

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	James Boyd	2280 N. 9th Avenue	Pensacola, FL. 32503
VP	Ralph Boyd	2280 N. 9th Avenue	Pensacola, Florida 32503
T	Simon Boyd	2280 N. 9th Avenue	Pensacola, Fl. 32503

600003217976--8

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: _____ 4/18/00 850-433-3234

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

Pg 2 of 2

THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 669661 7158500

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 1050.00

ORDER DATE : April 20, 2000

ORDER TIME : 4:22 PM

ORDER NO. : 669661-005

CUSTOMER NO: 7158500

CUSTOMER: Suzanne N. Whibbs, Esq
Whibbs & Whibbs, P.a.

421 North Palafox Street
Pensacola, FL 32501

RECEIVED
00 APR 20 PM 4:45
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: BOYD BROTHERS OF PENSACOLA, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIALS _____