

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV 27 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000077862

1. Corporation Name

BEARDOG, INC.

Principal Place of Business

250 S OCEAN BLVD
#7H
BOCA RATON FL 33432
US

Mailing Address

250 S OCEAN BLVD
#7H
BOCA RATON FL 33432
US

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

2. New Principal Office Address, If Applicable

4850 NW 5th Ave

Suite, Apt. #, etc.

City & State

Boca Raton FL

Zip

33431

Country

US

3. New Mailing Office Address, If Applicable

4850 NW 5th Ave

Suite, Apt. #, etc.

City & State

Boca Raton FL

Zip

33431

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

09/09/1997

5. FEI Number

65-0804783

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 |
|---------------|---|--|-------------------------|
| D | HANNIFAN, JOHN T | 250 S OCEAN BLVD STE 7H | BOCA RATON FL 33432 |
| D | HANNIFAN, COLLEEN B | 250 S OCEAN BLVD STE 7H | BOCA RATON FL 33432 |
| D | HANNIFAN, JAMES T | 4850 NW 5TH AVE | BOCA RATON FL 33431 |
| | | | |
| | | | |
| | | | |
| | | | |

8. Name and Address of Current Registered Agent

HANNIFAN, COLLEN
250 S OCEAN BLVD
#7H
BOCA RATON FL 33432

9. Name and Address of New Registered Agent

Name
James T. Hannifan
Street Address (P.O. Box Number is Not Acceptable)
4850 NW 5th Ave
Suite, Apt. #, Etc.

City
Boca Raton

State
FL

Zip Code
33431

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11/21/02

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/21/02 561-289-3401

CR2E040 (8/02)

November 20, 2002

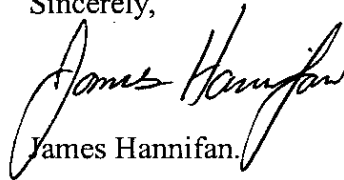
This is to notify the State of Florida that Beardog, Inc., EIN 65-0804783 would like to be reinstated to active status.

Prior UBR notice was never received by Beardog, Inc.

Please note change of Registered Agent.

Enclosed is a check for \$150 for filing without penalty.

Sincerely,


James Hannifan.