PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
[redacted]
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2002 OCT 22 PM 2:08

DOCUMENT # P97000080638

1. Corporation Name
AMERICA'S HR TEAM, INC.

REINSTATEMENT 2002

100008365271
10/22/02--01039--006 **688.75

2. Principal Office Address	**3.** Mailing Office Address
150 PINELLAS BAYWAY	150 PINELLAS BAYWAY
Suite, Apt. #, etc.: SUITE 208	Suite, Apt. #, etc.: SUITE 208
City & State: TIERRA VERDE, FL	City & State: TIERRA VERDE, FL
Zip: 33715 Country: PINELLAS	Zip: 33715 Country: PINELLAS

4. Date Incorporated or Qualified To Do Business in Florida: 9/17/97

5. FEI Number: 65 0783477 ☐ 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: RICHARD B. KIRACOFE

100008365271
10/14/02--01078--002 **70.00

Street Address (P.O. Box Number is Not Acceptable): 128 12TH ST. E.

Suite, Apt. #, Etc.:

City: TIERRA VERDE State: FL Zip Code: 33715

DC 10-22-02

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: Richard B. Kiracofe (REGISTERED AGENT MUST SIGN) Date: 10/21/02

CR2E081 (9/01)

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
PRESIDENT	RICHARD B. KIRACOFE	128 12TH ST. E. ~~TIERRA VERDE, FL~~	TIERRA VERDE, FL 33715
SECRETARY	" "	" "	" "
TREASURER	" "	" "	" "
DIRECTOR	" "	" "	" "

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: Richard B. Kiracofe President 10/21/02 727-865-9400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #