

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

APPROVED
AND
FILED

01 JUN -5 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P97000009 893

1. Corporation Name

HUNWORTH, INC.

2. Principal Office Address

465 OCEAN DRIVE

Suite, Apt. #, etc.

UNIT 925

City & State

MIAMI BEACH, FL

Zip

33139

Country

U.S.

3. Mailing Office Address

119 ESTIA LANE

Suite, Apt. #, etc.

City & State

PORT ST. LUCIE, FL

Zip

34983

Country

U.S.

000004416800--3

-06/13/01--01009--006

***1058.75 ***1058.75

4. Date Incorporated or Qualified
To Do Business in Florida

NOV. 4, 1997

5. FEI Number

☒ 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

RONALD J. SHAW

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

~~119 ESTIA LANE~~ 119 ESTIA LANE

Suite, Apt. #, Etc.

City

~~PORT ST. LUCIE~~ PORT ST. LUCIE

State

FL

Zip Code

34983

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 MAY 17, 2001

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	RONALD J. SHAW	14710 CHANT 119 ESTIA LANE	SAN ANTONIO TX 78248 PORT ST. LUCIE, FL 33983
Adm-	900.00		
AR	61.25		
ARsupp-	88.75		
Cont-	8.75		

REINSTATEMENT 99-01

MW

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAY 17, 2001

Date

305-789-5434

Daytime Phone #

CR2E081 (9/00)



UCC FILING & SEARCH SERVICES, INC.
526 East Park Avenue
Tallahassee, Florida 32301
(850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

849690,1/105875C

June 5, 2001

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Hunworth Inc.

Filing Evidence

☒ Plain/Confirmation Copy

☐ Certified Copy

Retrieval Request

☐ Photocopy

☐ Certified Copy

Type of Document

☐ Certificate of Status

☒ Certificate of Good Standing

☐ Articles Only -

☐ All Charter Documents to Include
Articles & Amendments

☐ Fictitious Name Certificate

☐ Other

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 JUN -5 AM 10:03
SUFFOLK COUNTY OF FILING

NEW FILINGS	
	Profit
	Non Profit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
X	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

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