. ,	PLEASE READ	ALL INST	RUCTI	ONS BEFORE C	OMPLETING TH	IIS FORM.	$\sim$	
• API	-LICATION	FLORIDA	V DEI VI	RTMENT OF STATE		APPROVE		
FOR Secretary of State REINSTATEMENT					00.007.10.00			
DOCUMENT # P98000042619  1. Corporation Name  LAVIN & LAVIN, INC.					OO OCT 18 PM 2: 37			
					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business Mailing Address								
US	ON FL 33487	902 CLINTMORE RD 108 BOCA RATON FL 33487 US ough incorrect information and enter correction below.						
	ddresses are incorrect in any way, line thr ncipal Office Address, If Applicable			dress, If Applicable	4. Date Incorporated or Qu	ualified		
Suite, Apt.	#, etc.^ *= *-	Suite, Apt. #,	etc	1 2	To Do Business in Flori	da 05/12/1		
City & State	9	City & State		· · · · · · · · · · · · · · · · · · ·	5. FEI Number 65-083	37918	Applied For Not Applicable	
Zip	Country	Zip		Country	6. CERTIFICATE OF STATUS	\$ DESIRED  \$8.75 Add for a Ce	litional Fee required rificate of Status	
7. Names	and Street Addresses of Each Officer and	or Director (Flo	rida nonprofi	it corporations must list at lea Street Address of Each	st 3 directors)	-		
Title(s)	Name of Officers and/or Directors 2			Officer and/or Director	4	City / State / Zi	P	
D	D LAVIN, JON E 902			NTMORE RD #108	BOCA RATON FL 33487			
				And the second s	3000	1034467 11/01/00010 ****150.00 *	339 43021 ***150.00	
	8. Name and Address of Current	Registered Age	ent		9. Name and Address of	New Registered Agent		
Name							(8/00)	
,					O. Box Number is Not Acce	ptable)		
902 CLINTMORE RD STE 108 BOCA RATON FL 33487				Suite, Apt. #, Etc.	Suite, Apt. #, Etc.			
				City	City State Zip Code			
10. I, being Signature o Registered	Agent	egistered ag	I RE	OFFICE OF STREET	ligations of Section 607.050			
this rein owed b	that I am an officer or director or the rece estatement application, the reason for diss y the corporation have been paid and the application is true and accurate, and my s	olution has been names of individ	n eliminated, duals listed o	the corporate name satisfies in this form do not qualify for	the requirements of section ( an exemption under section	607.0401 or 617.0401, F.	.S., that all fees	
SIGNA		JIC S	SIGNING OFF	CER OR DIRECTOR	12/15/C	OO.	Phone #	



2020

Jon E. Lavin National Sales Director Licensed Florida Mortgage Broker 902 Clintmoore Road, Suite 108 Boca Raton, FL 33487 (561) 995-7032 Fax: (561) 995-7033

October 11, 2000

Florida Department of State Division Of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: FEI Number 65-0837918

To Whom It May Concern:

Last week we opened an additional bank account and we were informed at that time that our corporation had been dissolved. We were quite surprised and immediately contacted our accountant as well as your office. We were told that the corporation was dissolved because we did not file our Annual Report. Our office has never received any documentation regarding the renewal of our corporation. We were told that we should have received the original notice in January and then a few months later a second notice. We have received nothing. This is something that we would not let slide if in fact we had received the necessary paperwork.

I am requesting that your office waive the reinstatement fee. Enclosed please find the Reinstatement form along with a check in the amount of \$150.00. (Annual Report Fee \$65.00, Corporate Supplemental Fee \$88.75.)

Thank you,

Karen Lavin

Registered Agent