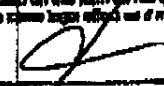


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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		REINSTATEMENT <u>20-04</u> FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 04 JAN 28 PM 2:08	
DOCUMENT # P98000050076 1. Corporation Name ANDEAN FINANCIAL CORPORATION					
2. Principal Office Address 14250 ROYAL HARBOUR CT		3. Mailing Office Address		4. Date Incorporated or Qualified To Do Business in Florida	
State, Apt. #, etc.		State, Apt. #, etc.		5. FR # <u>52-2106080</u> ☐ Applies For ☐ Not Applicable	
City & State FORT MEYERS		City & State		6. CERTIFICATE OF STATUS DESIRED ☐	
Zip 33908	Country	Zip	Country		
7. Name and Address of Current Registered Agent					
Name DAVID MAYER					
Street Address (P.O. Box Number is Not Accepted) 14250 ROYAL HARBOUR COURT					
State, Apt. #, etc.					
City FORT MEYERS State FL Zip Code 33908					
8. I, being appointed the registered agent of the above named corporation, do hereby verify and accept the obligations of section 607.0503 or 617.0503, F.S.					
Signature of Registered Agent 				Date <u>1/22/04</u>	
REGISTERED AGENT MUST SIGN					
9. Name and Street Address of Each Officer and/or Director (except in corporations that are exempt as directed)					
Title	Name of Officer and/or Director	Street Address of Each Officer and/or Director		City / State / Zip	
D	DAVID MAYER	14250 ROYAL HARBOUR COURT		FORT MEYERS, FL 33908	
10. I certify that I am an officer or director of the corporation to which this application is submitted for in Chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for suspension was nonpayment, and the corporation has satisfied 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)(b), F.S. The information included on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
SIGNATURE: <u>DAVID MAYER</u> 				Date <u>1/22/04</u> 239-297-1949	
SIGNATURE AND TYPE ON PRINTED NAME OF SIGNED OFFICER OR DIRECTOR					

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Florida Department of State
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CORPORATION REINSTATEMENT

ANDEAN FINANCIAL CORPORATION

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