

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 SEP 25 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000050094

1. Corporation Name

An Honest Stand, Inc.

2. Principal Office Address

6302 Benjamin Rd

Suite, Apt. #, etc.

407

City & State

Tampa FL

Zip

33634

Country

USA

3. Mailing Office Address

6302 Benjamin Rd

Suite, Apt. #, etc.

407

City & State

Tampa FL

Zip

33634

Country

USA

REINSTATEMENT 05-06
CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

6/3/98

5. FEI Number

59-3517397

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

Chris Duwall

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

6302 Benjamin Rd #

Suite, Apt. #, Etc.

406

City

Tampa

State

FL

Zip Code

33634

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

CL Duwall

REGISTERED AGENT MUST SIGN

Date

9/18/06

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
P.T.S	Chris Duwall	6302 Benjamin Rd # 407	Tampa, FL 33634

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 contained in Chapter 119, 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:

Chris Duwall

Chris Duwall

9/18/06

Date

813-966-7949

Daytime Phone #