

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV 20 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000102718

1. Corporation Name

J. F. LIMITED, INC.

Principal Place of Business

ALCOM MOTGAGE AKA J.F. LIMITED. SES
677 WASHINGTON BLVD.
SARASOTA FL 34236

Mailing Address

ALCOM MOTGAGE AKA J.F. LIMITED. SES
677 WASHINGTON BLVD.
SARASOTA FL 34236

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

01/01/1999

Suite, Apt. #, etc.

1460 Main Street, Box 9

Suite, Apt. #, etc.

3314 JAFFA Dr

City & State

Sarasota, FL

City & State

Sarasota, FL

Zip

34236

Country

Sarasota

Zip

34239

Country

Sarasota

5. FEI Number

65-0886320

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	FELBAUM, JOHN A	3740 ALMERIA AVE., #E-4	SARASOTA FL 34239
D	FERREL, ROBERT J	806 DAKOTA STREET	TEMPLE TX 76504
			300009091083 11/20/02--01010--018 **150.00
			300009091083 11/20/02--01010--017 **8.75

8. Name and Address of Current Registered Agent

FELBAUM, JOHN A
3740 ALMERIA AVE., #E-4 -X old address
SARASOTA FL 34239

9. Name and Address of New Registered Agent

Same
Name
Fellabaum, John A.
Street Address (P.O. Box Number is Not Acceptable)
3314 JAFFA Drive
Suite, Apt. #, Etc.
City
Sarasota
State
FL
Zip Code
34239

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

John Allen Fellabaum
REGISTERED AGENT MUST SIGN

Date 11/7/02

11. 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: John Allen Fellabaum
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2040 (8/02)

11/08/02

**ALCOM
MORTGAGE**

To Whom it May Concern,

Please return my Corporation back to active status. I did not receive the first two notices to file a uniform business report.

We moved our mailing address (residence & home office) and office downtown. My old office at Washington called with the revocation notice.

I have filled out the form with our new office & mailing address. I would also like to receive an activation status report, so I am enclosing the additional \$8.75. I will frame the status report also to help me remember to always file in a timely manner - whether I have been notified or not due to address change. I apologize for this old stationary.

941.951.0410 Toll-Free 888.640.1828 Fax 941.951.6430
Sarasota Executive Suites 677 Washington Blvd. Sarasota, FL 34236
1460 Main Street, Box 19
Sarasota, FL 34236

New letterhead & business cards
are being worked on currently at Sir Speedy.
Thank you in advance for reinstatement

Sincerely
John Allen Fallaban
ALCOM Mortgage