

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1-2

APPLICATION
FOR
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT 18 PM 2:37

DOCUMENT # P99000001461

1. Corporation Name

THE FAIRWAY GROUP, INC.

Principal Place of Business

Mailing Address

20855
20815 N.E. 16 AVE. -B3 C-37
MIAMI FL 33179

20855
20815 N.E. 16 AVE. -B3 C-37
MIAMI FL 33179



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

2. New Principal Office Address, If Applicable

20855 NE 16 Ave C-37

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

20855 NE 16 Ave C-37

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/05/1999

5. FEI Number

65 099 7160

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	DEVITO, KEVIN	20855 20815 N.E. 16 AVE. -B3 C-37	MIAMI FL 33179
D	LYNN, ERIC	20855 20815 N.E. 16 AVE. -B3 C-37	MIAMI FL 33179

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-11/09/00--01118--025

***150.00 ***150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DEVITO, KEVIN
20855
20815 N.E. 16 AVE. -B3 C-37
MIAMI FL 33179

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City
State
FL
Zip Code

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.

Signature of
Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 10-16-00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Kevin L. Devito
Date 10-16-00
Daytime Phone # 305 652-1427

AD

CR2E040 (8/00)

2
20855 Northeast 16th Avenue C-37
Miami, Florida 33179
Phone: (305) 652-1427
Fax: (305) 652-7511

The Fairway Group, Inc.

Date: 10-16-00

To: Whom it may concern

From: Kevin DeVito

Fax: _____

Pages (including cover): _____

Re: This Application for
reinstatement.

The reason this check is late
was because it was sent to
the wrong address. I just recieved
it today 10-16-00 and sent this
check right away. Enclosed is
proof of address it was sent to
initially. As one of your reps. instructed
I filled out the reinstatement form
and sent you the check for
\$150.00. Circled above is the right address.
Any questions please call Kevin DeVito

see
Attached
sheet

Manufacturers of the
Fairway Golf Collection