2000-2402

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

ACCEPTED AND FILED
02 JUN 19 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000002165

1. Corporation Name AMY N. INC

000006117640--0
-07/01/02--01031--017
****308.75 ****308.75

05/27/02 90288 009 #150.00

2. Principal Office Address	**3.** Mailing Office Address
70 CoCo Plum DR	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MARATHON FL	City & State: FL
Zip: 33050 Country: USA	Zip: Country:

4. Date Incorporated or Qualified To Do Business in Florida JAN 7 99

5. FEI Number: 65-0887228 ☐ 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: William Hauck

Street Address (P.O. Box Number is Not Acceptable): 70 CoCo Plum Dr Marathon Fl

Suite, Apt. #, Etc.:

City: | State: FL | Zip Code: 33050

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 W. Hauck Date

REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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
Pres.	William Hauck	70 CoCo Plum Dr	Marathon FL 33050
V/P	"	"	"
Sec	"	"	"

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 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: W. Hauck 305 289 0827

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

AMY N. INC

June 13, 2002

Fla Dept of State
Attn: Yula Peterson

Dear Yula,

Please accept this as a waiver of reinstatement fees, due to non-receipt of mailed uniform business reports for 2000 & 2001. Obviously the U.S Postal Service did not forward them as per completed form, from the very old address, also please note the attorney that handled this corp. has been retired (registered agent) for over 2yrs now. Nothing has been forwarded. His name was Alfred Frigola, formerly of a firm now at 743-6565 (305)

Also, please note an additional fee of $8.75 is included w/ $150. per year fee for 2000 & 2001, total in $308.75.

Please expedite certificate of status via fax if possible to: 305-743-9439, as this situation is now creating economic hardship on myself & employees, as we cannot operate.

Please call w/ any questions

Thanking you in advance, I remain,

W. C. Hauck

Pres.