

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 20 AM 10:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P44000012685

1. Corporation Name

Jekyll + Hyde Design, Inc.

400023954384  
10/20/03--01039--004 \*\*150.00

**REINSTATEMENT 03**

2. Principal Office Address

178 Ward Ave

Suite, Apt. #, etc.

3. Mailing Office Address

178 Ward Ave

Suite, Apt. #, etc.

City & State

Winter Park, FL

City & State

Winter Park, FL 32789

Zip

32789

Country

USA

Zip

32789

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

10/1/99

5. FEI Number 59-3562191

~~59-3562191~~

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

Jennifer Sloan

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

178 Ward Ave

Suite, Apt. #, Etc.

City

Winter Park

State

FL

Zip Code

32789

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

[Signature]

Date

10/1/03

REGISTERED AGENT MUST SIGN

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	Jennifer Sloan	178 Ward Ave	Winter Park, FL 32789

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/1/03

Date

407-629-1350

Daytime Phone #

CR2E061 (10/02)

10/1/03

NOT COMPLETED  
CORRECTION(S)

## Jekyn & Hyde Design, Inc.

Florida Department of State  
Division of Corporations

10/17/03

RE: Reinstatement

To whom it may concern:

I am writing to request that our corporation be reinstated as of the time that you receive this letter, the proper forms and our check for \$150. We did not receive any request for payment regarding our annual report at any time so we therefore respectfully request reinstatement for the \$150 fee.

Please also know that the corporate address has changed and is correct on the new forms that we are filing. This address changed only 15 days ago so there is no correlation between that and the fact that we did not receive request for payment.

Sincerely,



Jennifer S Sloan  
President