PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 APR 30 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000012720

1. Corporation Name
The Student Welcome Pack, Inc.

02-03 UBR

2. Principal Office Address	3. Mailing Office Address
954 West Brevard St	P.O. Box 20208
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tallahassee, FL	City & State: Tallahassee, FL
Zip: 32304 Country	Zip: 32316 Country

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 59-3556889 ☐ 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: Belinda T FRANCO ESQ
Street Address (P.O. Box Number is Not Acceptable): 703 E Tennessee ST
Suite, Apt. #, Etc.:
City: Tallahassee State: FL Zip Code: 32308

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0303, F.S.

Signature of Registered Agent: Belinda T Franco Date: 4/30/03
REGISTERED AGENT MUST SIGN

CR2E031(10/02)

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PT	Robert Parker	954 West Brevard St	Tallahassee, FL 3230
VPS	Blaise Proutola	954 West Brevard St	Tallahassee, FL 32304

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06/11/03--01071--008 **300.00

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: _____ 4/28/03 2511608
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2nd 2

To Whom It May Concern:

Please find attached a corporate reinstatement form as well as a check for 2 years of corporate filing fees.

It seems that in the move between offices we did not receive our paperwork for the previous year and were dissolved as a result.

We would ask that you wave the fines for last year since we did not receive the forms.

If you have any questions regarding the above request, please feel free to contact me at parker@fsview.com or 850 251 1608.

Thank you,

Robert Parker
President, Student Welcome Pack, Inc.

Getting a head start on college.

The Student Welcome Pack, Inc.
P.O. Box 20334
Tallahassee, FL 32316-0334
(850) 201-2601