

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

16 NOV -3 PM 3:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000025717

1. Corporation Name

**SUNGOLD HOLDINGS, INC.**

2. Principal Office Address - No P.O. Box # 1000 W. Central Boulevard  
3. Mailing Office Address 1000 W. Central Boulevard

Suite, Apt. #, etc.

City & State Orlando, Florida  
City & State Orlando, Florida

Zip Country 32805 USA  
Zip Country 32805 USA

CR2E081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida  
03/17/1999  
5. FEI Number 59-3563785  
Applied For Not Applicable  
6. CERTIFICATE OF STATUS DESIRED NO \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name DECEASED Janice Sue Gentry, Personal Representative  
Robert H. Gentry, III Of the Estate of Robert H. Gentry, III  
Street Address (P.O. Box Number is Not Acceptable)  
5750 Oak Hollow Lane  
Suite, Apt. #, Etc.

City State Zip Code  
Oviedo FL 32765

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11/09/16--01022--010 \*\*1420.00

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 Janice Sue Gentry Date 10-25-16  
Janice Sue Gentry, PR 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
✓	Robert H. Gentry, IV	5745 Oak Hollow Lane	Oviedo, Florida 32765
✓	Cheston R. Gentry	5528 Bruce Avenue	Louisville, Kentucky 40214

10. E-mail Address: A1Speed@aol.com

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: Robert H. Gentry, IV Date 10/25/2016  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR