



DIVISION OF CORPORATIONS

01 AUG 27 AM 9:47

1. Corporation Name

TUMS Construction Inc.

3. Mailing Office Address

13800 NE 12th Ave

Suite, Apt. #, etc.

#103

City & State

N Miami, FL

Zip

Country

33161

Dade

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number

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

Tammy Sanchez

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

13800 NE 12th AVE

Suite, Apt. #, Etc.

#103

City

Nmianu

State

Zip Code

FL

331 (e)

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

REGISTERED AGENT MUST SIGN

Date _____

8/22/01

8. 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
President	Tammy Sanchez	13800 NE 12th	N Miami
			500004573355-- -09/06/01-01106--022 ***300.00 ***300.00
			SP

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)(f), 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

Date _____

Daytime Phone #