

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

2011 SEP 30 PM 4:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P99000037665**

1. Corporation Name

R.T. Fence Inc.

2. Principal Office Address - No P.O. Box #

3134 SW Fambrough St.

Suite, Apt. #, etc.

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

Port Saint Lucie, Florida

City & State

same

Zip

34953

Country

USA

Zip

same

Country

same

**REINSTATEMENT**

09-11

CR2E081 (11/10)

4. Date Incorporated or Qualified

To Do Business in Florida 04/1999

5. FEI Number

650914743

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$3.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Ralph Tumino

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

3134 SW Fambrough Street

Suite, Apt. #, Etc.

City

Port Saint Lucie

State

FL

Zip Code

34953

700212709327  
09/29/11--01018--004 \*\*1015.00  
700212709327  
09/21/11--01009--015 \*\*43.75

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

*Ralph Tumino*

REGISTERED AGENT MUST SIGN

Date 09/30/2011

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	Ralph Tumino	3134 SW Fambrough Street	Port Saint Lucie/ FL / 34953

*R 9/30*

10. E-mail Address: ralph.tumino@att.net

(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:

*Ralph Tumino* Ralph Tumino

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/30/2011

(954) 444-6722

Date

Daytime Phone #

## Release Letter

I Ralph Tumino Owner of R.T. Fence Inc. Document number P11000037378 hereby authorize release of my corporation name R.T. Fence Inc. to myself so that I can reinstate my old Corporation R.T. Fence Inc. Document number P99000037665.

  
Applicants Signature

9/15/11  
Date

STATE OF FLORIDA  
COUNTY OF ST. LUCIE

On the 15<sup>th</sup> day of September, before me personally came Ralph Tumino who being by me duly sworn, did depose and say that he resides in St. Lucie County and that he is the President of R.T. Fence Inc. the corporation described in which executed the above and that he signed his name thereto by like order.

My Commission expires



