

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 31 AM 9:19

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P99000045816

1. Corporation Name

LINKOUS LAW ASSOCIATES,
CHARTERED

2. Principal Office Address

9012 Copeland Road

3. Mailing Office Address

9012 Copeland Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa FL

City & State

Tampa FL 3

Zip

33637-5102

Country

USA

Zip

33637-5102

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

05/11/1999

5. FEI Number

59-3578677

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

J. JUANELL LINKOUS

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

9012 Copeland Road

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33637-5102

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

J. Juanell Linkous

REGISTERED AGENT MUST SIGN

Date

10/29/03

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
Pls/H	J. JUANELL LINKOUS	9012 Copeland Rd	Tampa FL 33637-5102

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:

J. Juanell Linkous

J. JUANELL LINKOUS 10/29/03

Date

Daytime Phone #

83/980-1997

CR2E081 (10/02)