

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 FEB 18 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P99000054720**

1. Corporation Name

NOCOR, INC. DBA TUFFY AUTO SERVICE

2. Principal Office Address

2572 TAMiami TrL.

Suite, Apt. #, etc.

3. Mailing Office Address

2572 TAMiami TrL.

Suite, Apt. #, etc.

City & State

PT. CHARLOTTE FLA

City & State

PT. CHARLOTTE FLA

Zip

33952

Country

USA

Zip

33952

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

06/16/1999

5. FEI Number

05-0977226

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

JAMES T. CALVERTERS

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

1237 UNDERHILL CIRCLE

Suite, Apt. #, Etc.

City

PORT CHARLOTTE

State
FL

Zip Code

33953

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.T. Calverters

REGISTERED AGENT MUST SIGN

Date **2/10/03**

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
PRES.	JAMES T. CALVERTERS	1237 UNDERHILL CIRCLE	PT. CHARLOTTE FL 33953
V.P.	MARK B. CLEARY	2106 MAURITANIA RD.	PORTA GORDA FL 33983

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:

Mark B. Cleary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/03

Date

941-764-9815

Daytime Phone #

js 2/15



Florida Department of Agriculture & Consumer Services
CHARLES H. BRONSON, Commissioner
 Tallahassee, Florida

January 31, 2003

Division of Consumer Services
 Post Office Box 6700
 Tallahassee, FL 32314-6700
 Fax 850-410-3804
 Web Site: www.800helpfla.com

Refer To: **DTN641962 MV39415**

TUFFY AUTO SERVICE CENTER
1237 UNDERHILL CIRCLE
PORT CHARLOTTE, FL 33953

Dear Sir or Madam:

We have received the documents you submitted in accordance with Section 559.904, Florida Statutes, the Florida Motor Vehicle Repair Act.

A review of the materials indicates that the registration requirements are not satisfied for the following reason(s):

1. We did not receive a copy of your Estimate and Invoice form(s). Enclosed is a sample form that is in compliance with the changes in the law as of October 01, 2001. You may use this format as a guideline or to have your own forms printed. (See attached).
2. The application submitted lists the business as a corporation. The Department of State does not show an active corporation for this name. Please submit documentation showing the corporation is active, or the business type has changed.

Please forward the requested information within 20 days of the date of this letter to the Department of Agriculture and Consumer Services, Bureau of Compliance, 407 S Calhoun St, Tallahassee, FL 32399-0800.

It is a violation of the Motor Vehicle Repair Act for any motor vehicle repair shop or employee to engage or attempt to engage in repair work for compensation of any type without first being registered with the Department of Agriculture and Consumer Services.

If you have any questions, please contact this office. Thank you for your prompt attention to this matter.

To ensure accuracy please return a copy of this letter with your response.

January 31, 2003

Sincerely,

Faith Connelly

Faith Connelly

Ops - Services

1-850-410-3673

connelf@doacs.state.fl.us

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1237 UNDERHILL CIRCLE
PORT CHARLOTTE, FL 33953

Dear Sir or Madam:

We have received the documents you submitted in accordance with Section 559.904, Florida Statutes, the Florida Motor Vehicle Repair Act.

A review of the materials indicates that the registration requirements are not satisfied for the following reason(s):

TUFFY AUTO SERVICE

2572 TAMiami TRAIL
PORT CHARLOTTE FL 33952
941-764-9815

February 11, 2003

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN,

I AM WRITING THIS LETTER TO LET YOU KNOW I HAVE NEVER RECEIVED A LETTER FROM THE STATE OF FLORIDA REGARDING A CORPORATE ANNUAL REPORT. THE ORIGINAL ADDRESS USED BY MY PARTNER WAS 5265 BOYLE TR, PT CHARLOTTE, FLA. HE MOVED FROM THAT ADDRESS IN 2000. OUR NEW ADDRESS IS STATED ABOVE. I WOULD VERY MUCH LIKE TO REINSTATE OUR CORPORATE STATUS AT THIS TIME AND AM ENCLOSING A CHECK FOR 600.00 AS INSTRUCTED BY YOUR AGENT.

Sincerely,
MARK B. CLEARY


Signature