PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION ~~REINSTATEMENT~~ FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS
00-03 UBI2

FILED
03 FEB -7 AM 10:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000056540

1. Corporation Name
Jones Motors of Miami, Inc

2. Principal Office Address	3. Mailing Office Address
251 N.W. 177st Unit 116	Same
Suite, Apt. #, etc.: Unit 116	Suite, Apt. #, etc.: Same
City & State: Miami, FL	City & State: Same
Zip: 33169 Country: USA	Zip: Same Country: Same

4. Date Incorporated or Qualified To Do Business in Florida: June 23 1999

5. FEI Number: 04-3724871 — ✓ 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: New Age Property mgt. & Consulting Inc
Street Address (P.O. Box Number is Not Acceptable): 1242 N. Pine Hills Road Suite 101
Suite, Apt. #, Etc.: Suite 101
City: Orlando State: FL Zip Code: 32808

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: David Ferguson (REGISTERED AGENT MUST SIGN) Date: 2-1-03

CR2E081 (10/02)

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.	Leonard Jones	251 N.W. 177st Unit 116	Miami, FL 33169

900011914869
02/06/03--01072--002 **750.00

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: Leonard Jones Leonard Jones 2-4-03 305 652 5902
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2-4-03

To whom it May Concern:

I Leonard Jones is questing to Reinstate my Coreporation Jones Motor of Miami Inc. I did not Recieve the 1999 forms that I need to complete. I have been going threw same problem with my mail but the problem has been resolved I possible I am asking to waive other fees. My correct address is 251 N.W. 177th Unit #116 Miami Fl. 33169
If any questions you can contact me at home 305 652-8902 and inclosed is the $175.00 Reinstate fee. Thank You for your Coroporation.

Thank You
Pres. Leonard Jones
Jones Motor of Miami Inc.

P.S. Please cash Check #103 on Feb. 8, 2003
Thank You