

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



DIVISION OF CORPORATIONS

DOCUMENT # P99000058253

1. Corporation Name

PANHANDLE FOODS, INC.

2. Principal Office Address

1847 John Sims Pky E

Suite, Apt. #, etc.

City & State

NICEVILLE, FL

Zip

32478

Country

U.S.

3. Mailing Office Address

1847 John Sims Pky E

Suite, Apt. #, etc.

City & State

NICEVILLE, FL

Zip

32478

Country

U.S.

4. Date Incorporated or Qualified
To Do Business in Florida

6/28/1999

5. FEI Number

59-3607334

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

Jim McLEAN

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

1204 WINDWARD CIR.

Suite, Apt. #, Etc.

City

NICEVILLE

900003536769-8

-01/16/01-01017-001

****150.00 ****150.00

900003536769-8

-01/16/01-01017-002

State ****150.00 ****150.00

FL 32578

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 12/12/00

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
D	Jim McLEAN	1204 WINDWARD CIRCLE NICEVILLE, FL 32578	Niceville, FL 32578
D	Bob Hughes	503 RANA LANE	Niceville, FL 32478

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James R. McLean President

12/12/00

Date

897-4680

Daytime Phone #

292

BROWN, KIRKLAND & CAMPBELL, P.A.

Certified Public Accountants

7100 PLANTATION ROAD, SUITE 18
PENSACOLA, FLORIDA 32504
(850) 474-1536 / FAX (850) 484-7935

JERRY T. KIRKLAND
PAUL M. CAMPBELL
BERTON L. BROWN
(1935-1993)
MICHAEL P. CAMPBELL

Members
Florida Institute of
Certified Public Accountants
American Institute of
Certified Public Accountants

December 4, 2000

Director
Florida Department of State
Division of Corporations

Dear Director,

RE: Panhandle Foods, Inc. Corporate Reinstatement

I am writing to you this letter of explanation to respectfully request you allow Panhandle Foods, Inc. to reinstate their corporate status by paying the annual fee and forgiving the penalty. There were extenuating circumstances regarding the Company's situation that I ask you to consider.

The business was incorporated 1999 but did not have any activity until October of 2000. The Director of the Company has just moved to Florida in 2000 and did not receive his annual report. It is possible that the report was lost in the mail. The Director was unaware the annual fee was required, had he known the fee was due he would have paid it.

The Corporation is new to Florida laws. We respectfully ask that you waive the penalty portion of the fee and reinstate the Corporation to active status. Panhandle Foods, Inc. and I would deeply appreciate your approval of my request. I earnestly appreciate your consideration.

Sincerely,



Michael P. Campbell, C.P.A.