PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 AUG -2 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000082973

1. Corporation Name
Chill Out of Sarasota, Inc.
4333 So. Tamiami Trl., Unit D
Sarasota, FL 34237

03/05/01 90076 025 $900.00

2. Principal Office Address	**3.** Mailing Office Address
4333 So. Tamiami Trl.	1776 Ringling Blvd.
Suite, Apt. #, etc.: Unit D	Suite, Apt. #, etc.
City & State: Sarasota, FL	City & State: Sarasota, FL
Zip: 34237 Country: USA	Zip: 34236 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida 9-14-99

5. FEI Number 65-0959036 ☐ 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: Donald J. Harrell

Street Address (P.O. Box Number is Not Acceptable): 1776 Ringling Blvd.

Suite, Apt. #, Etc.:

City: Sarasota | State: FL | Zip Code: 34236

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: Donald J. Harrell — REGISTERED AGENT MUST SIGN — Date: 7/30/01

CR2E081 (8/00)

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
P	Victor Sabatini	6230 Bonaventure Ct.	Sarasota, FL 34231
VP	Max Stapleton	835 Mecca Dr., Apt. 4	Sarasota, FL 34231

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: Victor Sabatini — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 7/30/01 Date — 941-351-9821 Daytime Phone #