


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

08 NOV 17 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P99000083555

1. Corporation Name

TU-DO VIETNAMESE RESTAURANT INC

2. Principal Office Address - No P.O. Box #

7130 N DAVIS HWY

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PENSACOLA, FL

City & State

Zip

32504

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida 09-22-1999

5. FEI Number
59-3599285

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

BAO V NGUYEN

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

7130 N DAVIS HWY

Suite, Apt. #, Etc.

City

PENSACOLA

State

FL

Zip Code

32504

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

BAO NGUYEN
REGISTERED AGENT MUST SIGN

Date NOV 3, 2008

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	BAO V NGUYEN	7130 N DAVIS HWY	PENSACOLA FL 32504

REINSTATEMENT

RH

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 contained in Chapter 119, 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:

BAO NGUYEN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #