PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JAN -2 PM 12:14

DOCUMENT # P99000086354

1. Corporation Name
eTactics, Inc.

REINSTATEMENT 00-02

2. Principal Office Address	3. Mailing Office Address
8731 Marigold dr.	8731 Marigold dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Suite 100	Suite 100
City & State	City & State
New Port Richey, FL	Newport Richey, FL
Zip / Country	Zip / Country
34654 / USA	34654 / USA

4. Date Incorporated or Qualified To Do Business in Florida: 9-30-99

5. FEI Number: 59-3600000 ☐ 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: Matthew E. Gunter

000004769436--7
-01/11/02--01048--024
*****8.75 *****8.75

Street Address (P.O. Box Number is Not Acceptable): 8731 Marigold dr.

Suite, Apt. #, Etc.:

City: New Port Richey | State: FL | Zip Code: 34654

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: Matthew E. Gunter — REGISTERED AGENT MUST SIGN

Date: 12-19-2001

CR2E081 (9/00)

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
Pres.	Matthew Gunter	see Above	--
VP	Dawn Gunter	8731 Marigold dr.	Newport Richey, FL 34654

01/10/02

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: Matthew E. Gunter — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-19-2001 — Date

727-514-4346 — Daytime Phone #