PLEAS	E READ ALL INS	STRUCTIONS BEFOR	RE COMPLETING THIS FORM.
CORRORATION REINSTATIONARY		A DEPARTMENT OF STA Katherine Harris Secretary of State	TE FILED FILED FILED FILED OF STATE FILED STATE STATE OF STATE OF S
	99000105760		
1. Corporation Name Intune	Group Incorpor		
2			
4100 NE 2nd Ave 410		g Office Address NE @2nd Ave	
Suite, Apt. #. etc. 202	Suite, Apt 2	#, etc. 02	4. Date incorporated or Qualified
City & State Miami, FL	City & Sta Miam	te 1, FL	To Do Business in Florida 12/7/99 5. FEI Number 65–1014996 Applied For
Zip Country	Zip	Country 137 USA	6. SERVICIONAL OF STATUS DESIDED [] \$8.75 Additional Fee required
		Name and Address of Current Re	tor a certificate of Status
Name Scott	Bloom		
Street Address (P.O. B 100 Lind	DX Number is Not Acceptable		
Suite, Apt. #, Etc. 339	)	**** <u>150.00</u> ****150.00	
City Miami Beach			State Zip Code FL 33139
8. I, being appointed the registered a	gent of the above named co	rporation, am familiar with and accept	the obligations of section 607.0505 or 617.0503, F.S.
Signature of Registered Agent	REGISTERED	the obligations of section 607.0505 or 617.0503, F.S.	
9. Names and Street Addresses of I	Each Officer and/or Director (	Florida nonprofit corporations must lis	st at least 3 directors)
Titles Name of Officers and/or Directors		Street Address o Officer and/or D	
CEO Joseph Risolia		5880 Collins Ave	e Miami Beach,FL 33141
C Christopher Korge		10355 SW 67th Ave	Miami, FL 33156
P James A Walgreen JR		3653 Palmetto Ave	Miami, FL 33133
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Series and the series of the s		had a suggitte has failed and profile any angle of the second second second second second second second second	
this reinstatement application, the owed by the corporation have be	reason for dissolution has be an paid and the names of indi	en eliminated, the corporate name sa	on as provided for in chapter 607 or 617, F.S. I further certify that when filing atisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees ify for an exemption under section 119.07(3)(i), F.S. The information indicated a under oath.
	D TYPEDOR PRINTED NAME O	A	1/30/01(305)573- Date Daytime Phone #

1 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

.....

## The IntuneGroup, Inc.

4100 NE 2<sup>nd</sup> Avenue, Suite 202 • Miami, FL 33137 • Ph: 305-573-2820, 1-800-6-INTUNE • Fax 305-573-3546

To Whom It May Concern:

The purpose of this letter is regarding two Florida corporations of which I am a senior officer (see enclosed documents).

Several months ago my accounting department advised me that they had yet to receive documentation as to our Annual Business Reports. The senior department manager informed me that he had called on 2 separate occasions requesting said documents. However, nothing was ever received from your office. Two more requests were made to no avail.

Last month I was shocked when we received notification from your office stating that my companies had been dissolved (see enclosed documents). Said documents were sent without any information as to how this matter could be resolved. Therefore, I have taken it upon myself to retrieve the appropriate documents from the State of Florida website needed to reinstate said corporations (see enclosed documents).

I am enclosing our completed applications for both corporations along with the original filing fee of \$150.00 each. My legal department tells me that this is within my rights according to Florida. Statutes regarding proper notification.

It is my hope that this will resolve the matter once and for all. If you have any questions please feel free to contact me at anytime. My direct phone number is 305-573-2820. Thank you and happy holidays.

Sincerely,

Joseph Risolia GEO