PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION RENS TEMENT	FLORIDA DEPARTI Katherine Secretary DIVISION OF COR	e Harris of State	FILED SEURETARY OF STATE VISION OF CORPORATION	
DOCUMENT # P99000108020 1. Corporation Name			00 OCT 19 PM 12: 47	
J.N. WALKER LAWN GROOM	ING, INC.			
Principal Place of Business Mailing Address				
3279 YUKON DR. 3279 YUKON DR. PORT CHARLOTTE FL 33948 PORT CHARLOTTE FL 33948				
If above addresses are incorrect in any way, line through incorrect information and enter correction below.				
2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida 12/14/1999		
Suite, Apt. #, etc			5. FEI Number Applied For Not Applicable	
City & State Zip Country	Zip Country		6. \$8.75 Additional Fee required	
	<u> </u>		for a Certificate of Status	
7. Names and Street Addresses of Each Officer and Name of Officers and/or Directors	or Director (Florida nonprofit co	Street Address of Each Officer and/or Director	h r City / State / Zip	
D WALKER, JOSEPH N 3279 YUKON DI		IN DR.	PORT CHARLOTTE FL 33948	
		A COLUMN TO A COLU	0000034468405 100 11/01/0001051012 *****150.00 *****150.00	
			72	
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8. Name and Address of Current Registered Agent Name		9. Name and Address of New Registered Agent		
WALKER, JOSEPH N		Street Address (Name Street Address (P.O. Box Number is Not Acceptable) Suits Act # Etc.	
3279 YUKON DR. PORT CHARLOTTE FL 33948		Suite, Apt. #, Etc	Suite, Apt. #, Etc.	
City		State Zip Code		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.				
Signature of Registered Agent REGISTERED AGENT MUST SIGN Date 10/17/00				
11. 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 Daylime Phone #				

J.N. Walker

Lawn Grooming Service Inc. 3279 Yukon Drive Port Charlotte, FL 33948 (941) 743-6283

October 17, 2000

Dear Sir or Madam;

I am writing this letter regarding the filing of my 2000 uniform business report. I spoke with someone in your offices today and explained my situation. She advised me to put it in writing. As you can see from the history of my company I just became incorporated in December of 1999. Therefore, I am somewhat unfamiliar with the requirements to maintain this status. I received my first mailing from your offices, regarding the status of my corporation on the 14th of October and unfortunately it was your dissolution packet. I was very upset to find my company in this situation, and I can assure you that if I had received the prior information I would have returned it to you directly with the appropriate fees.

As I mentioned above I spoke with your offices today. Your agent advised this letter and that it be accompanied by my check for \$150.00. You can be sure that I will be watching for my 2001 report and it will be returned promptly. Thank you for your consideration regarding this matter. If you any further questions please do not hesitate to contact me at the above listed number.

Best Regards,

OM Walkum

Joseph N. Walker