CAPITAL CONNECTION 850 222 1222 12/08 '98 12:14 NO.916 02/02

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 JAN 27 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 541751

1 Corporation Name: Atkins International Properties, Inc.

REINSTATEMENT 9799

Principal Place of Business	Mailing Address
1500 South Conway Road Orlando Fl 32812	

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
201 Park Place	201 Park Place
Suite, Apt. #, etc. Suite 205	Suite, Apt. #, etc. Suite 205
City & State Altamonte Springs, Fl	City & State Altamonte Springs Fl
Zip 32701 Country USA	Zip 32701 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 1991

5. FEI Number: 59-3056991 — Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee Required

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
President	David G Martineau	201 Park Place, Suite 205 Altamonte Springs Fl 32701	Altamonte Springs Fl 32701
Treasurer	David G Martineau	Same as above	Same
Secretary	David G Martineau	Same as above	Same

000027F9774--3
-02/08/99--01071--025
***1050.00 ***1050.00

XS

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
David Van Gelder 201 Park Place Suite 205 Altamonte Springs Fl 32701	Name: David G Martineau Street Address (P.O. Box Number Is Not Acceptable): 201 Park Place Suite 205 Suite, Apt. #, Etc: Altamonte Springs City: Altamonte Springs State: FL Zip Code: 32701

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: David Van Gelder — REGISTERED AGENT MUST SIGN — Date: 12/8/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. 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.

2107

SIGNATURE: David G Martineau — 12/8/98 — 889-3799

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #