PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
96 NOV 14 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S13078

1. Corporation Name

KENDALE FUTONS, INC.

Mailing Address	Principal Place of Business
9220 Palm River Road Suite 105 Tampa, FL 33619	101 S. Dale Mabry Hwy. Suite E Tampa, FL 33609

REINSTATEMENT 95-96

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, If Applicable	3. New Principal Office Address, If Applicable
6211 Greenwich Drive	6211 Greenwich Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa, FL	City & State: Tampa, FL
Zip: 33647 Country:	Zip: 33647 Country:

4. Date Incorporated or Qualified To Do Business in Florida: 8/12/91

5. FEI Number: 59-3091673 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	Heidi Huebscher	~~9220 Palm River Road #105 Tampa, FL 33619~~ 6211 Greenwich Drive	~~Tampa, FL 33619~~ Tampa, FL 33647

S00002010335--9
-11/20/96--01112--007
***575.00 ***575.00

JB 11-18-96

8. Name and Address of Current Registered Agent

Icard, Merrill, Cullis, Timm, Furen & Ginsburg
2033 Main Street, #600
Sarasota, FL 34237

9. Name and Address of New Registered Agent:

Name: Heidi Huebscher
Street Address (P.O. Box Number is Not Acceptable): 6211 Greenwich Dr
Suite, Apt. #, Etc.:
City: Tampa State: FL Zip Code: 33647

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: Heidi Huebscher Date: 11-1-96
REGISTERED AGENT MUST SIGN

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: Heidi Huebscher, President 11-1-96 813-972-5307
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E040 (6/94)