PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

8162

CORPORATION REINSTATEMENT

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

FILED
01 APR -9 PM 4:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # S76781

1. Corporation Name
MERLIN & HERTZ, P.A.

2. Principal Office Address	**3.** Mailing Office Address
95 Merrick Way	95 Merrick Way
Suite, Apt. #, etc.: 420	Suite, Apt. #, etc.: 420
City & State: Coral Gables, FL	City & State: Coral Gables, FL
Zip: 33134 Country: U.S.	Zip: 33134 Country: U.S.

4. Date Incorporated or Qualified To Do Business in Florida: 8/29/91

5. FEI Number: 65-0283412 ☐ 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: ROBERT J. MERLIN

Street Address (P.O. Box Number is Not Acceptable): 95 Merrick Way,

Suite, Apt. #, Etc.: 420

City: Coral Gables State: FL Zip Code: 33134

200004085872--0
-04/30/01--01001--015
****300.00 ****300.00

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: Robert J. Merlin Date: 4/6/01
REGISTERED AGENT MUST SIGN

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
P	Robert J. Merlin	95 Merrick Way, Suite 420	Coral Gables, FL 33134
S	Christy L. Hertz	95 Merrick Way, Suite 420	Coral Gables, FL 33134

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: Robert J. Merlin President 4/6/01 (305) 448-1555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MERLIN & HERTZ, P.A.

ATTORNEYS AT LAW

95 Merrick Way, Suite 420 • Coral Gables, FL 33134
305.448.1555 • Fax 305.448.5337
e-mail rmerlin@merlinlaw.com • www.merlinlaw.com

ROBERT J. MERLIN
Board Certified
Marital and Family Law

April 6, 2001

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attention: Michelle Milligan
Document Specialist

Re: Reinstatement of Merlin & Hertz, P.A.
Ref. Number S76781

Dear Ms. Milligan:

I am in receipt of the Reinstatement Form which you sent to me. I have enclosed the completed form with a check in the amount of $300.00 covering the Annual Report fees for the years 2000 and 2001.

I hereby request that the Department waive the reinstatement fee. As you can see from the reinstatement form, the principal office address and the mailing office address have changed. I believe that as a result of our change of address in May 1999, the Annual Reports were never received for the years 2000 and 2001. This corporation has been doing business since 1991 and has always maintained a status of good standing. Strangely enough, Annual Reports for corporations of which I am the registered agent have been sent to this correct address, but for some reason the Annual Reports for our firm were not sent to the correct address.

I await your response with reference to my request. Please do not hesitate to contact me should you have any questions or require anything further.

Very truly yours,

Robert J. Merlin
For the Firm

RJM:cs
enclosures