

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

98 JUL 21 AM 11:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 897326

1. Corporation Name

ARKCO UNDERWRITERS, INC.

Principal Place of Business

Mailing Address

410 Miller & Schuh, P.A.
1400 N.E. Miami Gardens DR.
Suite 216
North Miami Beach, FLA 33179

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12.3.91

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

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
Pres	LARRY D. BROWN	130 FIREHORN LANE	FAYETTEVILLE, GA. 30215
Sec'y	MICHAEL JANOSEK	8601 PARK LANE #611	DALLAS, TX 75231

5000002594085-- 9

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DON BORDENAX
18455 9th AVE
St Petersburg, FLA.

Name

N. FRASER SCHUH, II

Street Address (P.O. Box Number is Not Acceptable)

1400 N.E. MIAMI GARDENS, DR.

Suite, Apt. #, Etc.

Suite 216

City

North Miami Beach

State

FL

Zip Code

33179

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

N. Fraser Schuh, II

REGISTERED AGENT MUST SIGN

Date

7/17/98

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.

SIGNATURE:

Michael A. Janosek, Sec'y
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MICHAEL A. JANOSEK

7-15-98

Date

(214) 373-3239

Daytime Phone #



ACCOUNT NO. : 072100000032

REFERENCE : 898396 162182A

AUTHORIZATION :

Patricia Pizzuto

COST LIMIT : \$ 1,658.75

ORDER DATE : July 21, 1998

ORDER TIME : 10:31 AM

ORDER NO. : 898396-005

CUSTOMER NO: 162182A

CUSTOMER: Ms. Debbie S. Miller
Robert B. Miller, P.a.
Suite 216
1400 N.e. Miami Gardens Drive
N. Miami Beach, FL 33179

DOMESTIC FILINGS

NAME: ARKCO UNDERWRITERS, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cassandra Bryant
EXAMINER'S INITIALS _____

98 JUL 21 AM 11:11
RECEIVED