APPLICATION OF STATE  FOR GUERN AND SANDER B. Mortham								OMPLETING THIS FORM.  APPROVED  AND  EVEN				
REINSTATEMENT  Secretary of State  DIVISION OF CORPORATIONS								INCO HAD LO DU DE DE				
DOCUMENT # V 30489								1998 MAR 12 PM 2: 03				
1. Corporation Name								SECRETARY OF STATE TALLAHASSEE, FLORIDA				
4261 GRIFFIN ROAD, INC.									······································			
Principal Place of Business Mailing Address												
4261 Griffin Road								7000024590377 -03/17/9801007014				
Davie, Florida								***1950.00 ***1050.00				
If above addresses are incorrect in any way, line through incorrect information and enter correction below.								1				
2. New Prin	ing Office Address, If Applicable				Date Incorporated or Qualified     To Do Business in Florida							
Suite, Apt. #, etc. Suite, Apt. #,				elc.				5. FEI Number Applied For				
City & State								6. Not Applicable				
Zip •	Country		Zip		Count	ry		CERTIFICATE			onal Fee require ficate of Status	d 
7. Names and Street Addresses of Each Officer and/or Director (Florida n					da nonprofit corporations must list at lea Street Address of Each Officer and/or Director			st 3 directors)				1
Title(s) and/or Directors				3 (Do NOT Use Post Office Box N 2401 S. Ocean Dr.			Box N	umbers) 4 City/State/Zip Hollywood, Florida3301			1	
Pres/ rustee John Radney				)*# <b>1</b> 005					morry wood, r			
VP	/P Richard Radney				s.	Ocean	Dr.	#1005	Hollywood, F	L 33	3019	_
Sec Susanna Radney				2401	s.	Ocean	Dr.	#1005	Hollywood, F	L 33	019	
Treas Jennifer Radney				2401	s.	Ocean	Dr.	#1005	Hollywood, F	ь зз	3019	
									<i>U</i>	de de	100/18	
							R	REINSTATEMENT 3				
Name and Address of Current Registered Agent     Name								9. Name and Address of New Registered Agent				
							ress (P.	P.O. Box Number is Not Acceptable)				
4261 Griffin Road,#1005 Davië, Florida						Suite, Apt.	Suite, Apt. #, Etc.					
City								State Zip Code				
10. I, being appointed the registered figent of the above named corporation, am familiar with and accept the oblig							igations of Section				1	
Signature of Registered A	gent	REC	SISTERED AG	NT MUST S	SIGN				Date3/6/	98		
11. This	s corporation on ngible Person	owes or(ha al Property	s paid the tax due	currer June 3	nt yea 0.	ar Yes		No K	(See other side on intang	for informible tax.)	nation	
this reinst owed by t	atement application, the	e reason for dissoli en paid and the na	ution has been e ames of individu	eliminat <b>ed</b> , th als listed on	e corpo this for	rate name sa m do not qual	lisfies th Ify for ar	ne requirements on exemption under	oter 607 or 617, F.S. I further c of section 607.0401 or 617.040 er section 119.07(3)(i), F.S. Th	11 F.S. 11	hat all fees	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Days me Phone #											1	