PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

V60747

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

FILED
96 NOV -4 PM 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V60747

1. Corporation Name
Fitzwilly's By-the-Sea, Inc.

Principal Place of Business	Mailing Address

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable	3. New Mailing Address, If Applicable
4250 Galt Ocean Drive	4250 Galt Ocean Drive
Suite, Apt. #, etc.: Apt. 4N	Suite, Apt. #, etc.: Apt. 4N
City & State: Fort Lauderdale, FL	City & State: Fort Lauderdale, FL
Zip: 33308 Country: Broward	Zip: 33308 Country: Broward

4. Date Incorporated or Qualified To Do Business in Florida: August 31, 1992

5. FEI Number: 65-0353723 ☐ 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)

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
P,T, S,D	Timothy Linden	4250 Galt Ocean Drive Apt. 4N	Fort Lauderdale, FL 33308

000002812820--3
-11/22/96--01090-015
****783.75 ****783.75

8. Name and Address of Current Registered Agent

Joyce L. Lucey
3003 Terraman SE
Fort Lauderdale, FL 33304

9. Name and Address of New Registered Agent

Name: Timothy Linden
Street Address (P.O. Box Number is Not Acceptable): 4250 Galt Ocean Drive
Suite, Apt. #, Etc.: Apt 4N
City: Ft. Laud. State: FL Zip Code: 33308

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: Timothy Linden REGISTERED AGENT MUST SIGN. Date: 10-30-96

11. 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.)

12. 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: Timothy Linden 10-30-96 (954) 776-7446
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E040 (12/95)