FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2008 JUN -3 AM 11:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F08000005234

1. Corporation Name
Hartung Collision Centers, Inc.

600128802115
05/08/08--01010--032 **750.00

CR2E081 (12/07)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
7052 Old Cheney Hwy	2869 Government Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando, FL	City & State: Mobile, AL 36606
Zip: 32807 Country: USA	Zip: 36606 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 2002

5. FEI Number: 63-1282593 ☐ 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: Wayne Hartung

Street Address (P.O. Box Address is Not Acceptable):
6596 Woodthrush

Suite, Apt. #, Etc.

City: Orlando State: FL Zip Code: 32810

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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: Wayne Hartung
REGISTERED AGENT MUST SIGN

Date: 05/01/08

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
Pres.	Wayne Hartung	6596 Woodthrush	Orlando, FL 32810

REINSTATEMENT
04-08-08

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 contained in Chapter 119, 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: Wayne Hartung 4/29/08 251-471-9606
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #