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
97 FEB 14 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000031097

1. Corporation Name

3300 Group, Inc.

Principal Place of Business	Mailing Address
3707 16th Avenue East Palmetto, FL 34221	3707 16th Avenue East Palmetto, FL 34221

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

REINSTATEMENT 95-97

2. New Principal Office Address, if Applicable	3. New Mailing Office Address, if Applicable
3704 16th Avenue East	3704 16th Avenue East
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Palmetto, FL	City & State: Palmetto, FL
Zip: 34220 Country: Manatee	Zip: 34220 Country: Manatee

4. Date Incorporated or Qualified To Do Business in Florida: 4/25/94

5. FEI Number: 65-0563388 ☐ 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
P/D	Brian M. Herron	358 N. Orchid Drive	Ellenton, FL 34222
VP/D	Robert C. Swanson	2504 Palma Sola Blvd	Bradenton, FL 34209
S/T/D	Delver D. Couch	3704 16th Avenue East	Palmetto, FL 34220
D	Earnest T. Andrews	3307 Manatee Ave West	Bradenton, FL 34205
D	Herbert I. Gordon	3307 Manatee Ave West	Bradenton, FL 34205

2/14/97

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
DELVER D. COUCH 3707 16th Avenue East Palmetto, FL 34221	Name: DELVER D. COUCH Street Address (P.O. Box Number is Not Acceptable): 3704 16th Avenue East Suite, Apt. #, Etc. City: Palmetto State: FL Zip Code: 34220

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***1080.00 ***100.00

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: Del Couch
REGISTERED AGENT MUST SIGN

Date: 1/15/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ xx

(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:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/97 (941) 747-2045
Date Daytime Phone #

BRIAN M. HERRON, President