

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

18 OCT 24 AM 4:32

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # F10000001282

1. Corporation Name

VERITY SOLUTIONS GROUP, INC.

2. Principal Office Address - No P.O. Box #

12131 113th Ave NE

Suite, Apt. #, etc

200

City & State

Kirkland, WA

Zip

98034

Country

USA

3. Mailing Office Address

12131 113th Ave NE

Suite, Apt. #, etc

200

City & State

Kirkland, WA

Zip

98034

Country

USA

CR2E081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida

03/12/2010

5. FEI Number

75-3054716

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

C T CORPORATION SYSTEM

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

1200 South Pine Island Road

Suite, Apt. #, Etc

City

Plantation

State

FL

Zip Code

33324

700320169857

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

Cardell Rankin, Asst. Secretary

Date 10/23/2018

REGISTERED AGENT MUST SIGN

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
CEO	George Puckett	12131 113th Ave NE	Kirkland, WA, 98034
CFO	Jon Sortland	12131 113th Ave NE	Kirkland, WA, 98034
Sec	Jon Sortland	12131 113th Ave NE	Kirkland, WA, 98034
Dir	Pamela Applefeld	12131 113th Ave NE	Kirkland, WA, 98034
Dir	Lonnie Edelheit	12131 113th Ave NE	Kirkland, WA, 98034
Dir	Richard Fade	12131 113th Ave NE	Kirkland, WA, 98034

10. E-mail Address: ct-statecommunications@wolterskluwer.com

(To be used for future annual report notification)

11. 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. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

SIGNATURE:

Jon Sortland, CFO 10/23/18

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

24 2018

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 10/24/2018

Acc#I20160000072

mic DW

Name:	VERITY SOLUTIONS GROUP, INC.
Document #:	
Order #:	11221855

Certified Copy of Arts & Amend:	☐		
Plain Copy:	☐		
Certificate of Good Standing:	☐		
	☐		
Apostille/Notarial Certification:	☐	Country of Destination:	
		Number of Certs:	

Filing: ☒	Certified: ☒
	Plain: ☐
	COGS: ☐

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 758.75

Thank you!

13 OCT 24 AM 11:36