PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 JUL 27 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000026010

1. Corporation Name
CLEARPATH, INC.

REINSTATEMENT 00-01

2. Principal Office Address	3. Mailing Office Address
16358 E. 33rd Drive	16358 E. 33rd Drive
Suite, Apt. #, etc.: 30	Suite, Apt. #, etc.: 30
City & State: Aurora CO	City & State: Aurora, CO
Zip: 80011 Country: USA	Zip: 80011 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 07-97

5. FEI Number: 59-3455433 ☐ 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: Raleigh W. Greene III

Street Address (P.O. Box Number is Not Acceptable): 401 Fourth Street North

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-08/21/01--01075--004
****908.75 ****908.75

Suite, Apt. #, Etc.:

City: St. Petersburg State: FL Zip Code: 33701

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: R W Greene III
REGISTERED AGENT MUST SIGN

Date: 6/21/01

CR2E061 (9/00)

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
P	Richard J. Pearce	14350 Braun Rd	Golden / CO / 80401
D	Steve Haley	3296 NW 62nd ST.	Boca Raton / FL / 33496
D	H. Boshwell Clarke	1201 Fifth Ave N. STE 408	St. Petersburg / FL / 33705
D	Bill Henderson	430 Wakefield Rd.	Orono / MN / 55391
D	James Littlejohn	10500 Ulmerton Road	Largo / FL / 34641
D	Raleigh Greene	401 4th Street N.	St. Petersburg / FL / 33701

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 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] CEO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/26/01
Date

303-662-6089
Daytime Phone #