

FILED

02 OCT 22 PM 4:37

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

John Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P99000005848

1. Corporation Name

ECS of Alabama, Inc.

2. Principal Office Address

2828 Crossdale Drive

Suite, Apt. #, etc.

3. Mailing Office Address

c/o Legal Department
2828 Crossdale Drive

Suite, Apt. #, etc.

City & State

Durham, North Carolina

City & State

Durham, North Carolina

Zip

27705

Country

USA

Zip

27705

Country

USA

4. Date incorporated or changed
To Do Business in Florida

01/20/99

5. FBI Number

65-0887127

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐32.75 Additional fee required
for a Good Standing Certificate

7. Name and Address of Current Registered Agent

Name
CT Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City
PlantationState
FLZip Code
33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0508 or 817.0603, F.S.

Signature of
Registered Agent*Barbara A. Burke*

BARBARA A. BURKE

SPECIAL ASSISTANT SECRETARY

10/17/02

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
D/I/S	Anita Wegner	2828 Crossdale Drive	Durham, NC 27705
D/P	Jack Greenman	500 West Cypress Creek Rd.	Ft. Lauderdale, FL 33309

10. I certify that I am an officer or director or the president or trustee empowered to execute this application as provided for in chapter 807 or 817, 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 807.0401 or 817.0401, F.S., that all taxes owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 112.07(5)(b), 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:

Anita Wegner

Anita Wegner

10/17/02 (800) 476-4587

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

ECS OF ALABAMA, INC.

Certificate of Status	1
Certified Copy	0
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ATTN: M. WAGNER