Sent By: COBB & COLE; 386 238 7003 ;

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FILED
Nov 17, 2003 8:00 A.M.
Secretary of State

PLEASE READ ALL INSTRUCTIONS BEFORE

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F02000005735

1. Corporation Name
BOOTH/HANSEN & ASSOCIATES, LTD., INC.

REINSTATEMENT 03

2. Principal Office Address	3. Mailing Office Address
333 S. Desplaines	333 S. Desplaines
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Chicago, IL	City & State: Chicago, IL
Zip: 60661 Country: US	Zip: 60661 Country: US

4. Date Incorporated or Qualified To Do Business in Florida: 11/05/2002

5. FEI Number: 363060862 ☐ 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: Palmetto Charter Services, Inc.

Street Address (P.O. Box Number is Not Acceptable): 150 Magnolia Avenue

Suite, Apt. #, Etc.:

City: Daytona Beach State: FL Zip Code: 32114

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: V.P. Date: 11/17/03
REGISTERED AGENT MUST SIGN

CR2E061 (10/02)

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	John C. Stetson	333 S. Desplaines	Chicago, IL 60661
D	George R. Halik	333 S. Desplaines	Chicago, IL 60661
D/P	Lawrence O. Booth	333 S. Desplaines	Chicago, IL 60661
D/S/T	James M. Stevenson	333 S. Desplaines	Chicago, IL 60661
V	William Massey	333 S. Desplaines	Chicago, IL 60661
	See Attached for additional officers		

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: _____ 312-869-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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Florida Department of State
Division of Corporations
Public Access System

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To:
Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : COBB & COLE
Account Number : I20030000050
Phone : (386)255-1811
Fax Number : (386)238-7003

CORPORATION REINSTATEMENT

BOOTH/HANSEN & ASSOCIATES, LTD., INC.

Certificate of Status	0
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