

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 18 PM 1:37 SECRETARY OF STATE TALLAHASSEE, FLORIDA																													
DOCUMENT # 526975 1. Corporation Name The Florida Group, Inc.		900002094839--S -02/24/97--01001--015 *****575.00 *****575.00																															
Principal Place of Business 5501 Independence Pkwy., Suite 314 Plano, Texas 75023		Mailing Address 5501 Independence Pkwy., Suite 314 Plano, Texas 75023																															
If above addresses are incorrect in any way, line through incorrect information and enter correction below.																																	
2. New Principal Office Address, If Applicable 5501 Independence Pkwy Suite, Apt. #, etc. Suite 314 City & State Plano, Texas Zip 75023 Country USA		3. New Mailing Address, If Applicable 5501 Independence Pkwy Suite, Apt. #, etc. Suite 314 City & State Plano, Texas Zip 75023 Country USA		4. Date incorporated or Qualified To Do Business in Florida 5. FEI Number 59-1733827 Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status																													
DO NOT WRITE IN THIS SPACE																																	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:5%;">Title(s)</th> <th style="width:25%;">Name of Officers and/or Directors</th> <th style="width:30%;">Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)</th> <th style="width:40%;">City & State</th> </tr> </thead> <tbody> <tr> <td>PD</td> <td>Angelo C. Prieto</td> <td>5501 Independence Pkwy Suite 314</td> <td>Plano, Texas 75023</td> </tr> <tr> <td>SD</td> <td>Stewart E. Davis</td> <td>906 Woodlief Trail</td> <td>Round Rock, Tx 78664</td> </tr> <tr> <td>D</td> <td>H. Custis Hoge</td> <td>Reverchon Plaza, Ste 810 3500 Maple Avenue</td> <td>Dallas, Tx 75219</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>						Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City & State	PD	Angelo C. Prieto	5501 Independence Pkwy Suite 314	Plano, Texas 75023	SD	Stewart E. Davis	906 Woodlief Trail	Round Rock, Tx 78664	D	H. Custis Hoge	Reverchon Plaza, Ste 810 3500 Maple Avenue	Dallas, Tx 75219												
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8. Name and Address of Current Registered Agent CT Corporation System 1200 South Pine Island Road Plantation FL 33324			9. Name and Address of New Registered Agent <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">Name</td> </tr> <tr> <td colspan="2">Street Address (P.O. Box Number is Not Acceptable)</td> </tr> <tr> <td>Suite, Apt. #, Etc.</td> <td>City</td> </tr> <tr> <td>State</td> <td>Zip Code</td> </tr> </table>			Name		Street Address (P.O. Box Number is Not Acceptable)		Suite, Apt. #, Etc.	City	State	Zip Code																				
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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 <u>Randy A. Shulley</u> Date <u>2/14/97</u> REGISTERED AGENT MUST SIGN																																	
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)																																	
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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. 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: <u>Angelo Prieto</u> Date <u>2-11-97</u> Daytime Phone # <u>972-758 0852</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																	