

APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

DOCUMENT # A94000000174

1. Name of Limited Partnership LTI INTERNATIONAL, LTD

4/14/95

97 SEP 05 PM 4: 24

DO NOT WRITE IN THIS SPACE

2. Mailing Address 2150 GOODLETTE ROAD

3. Principal Office Address 2150 GOODLETTE ROAD

4. Date Formed or Registered To Do Business in Florida 2-10-94

5. FEI Number 65-0354528

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status

7. State or Country of Formation FLORIDA

8a. Capital Contributions as Shown on Record \$31,000,000.00

8b. Amount of Capital Contributions in FLORIDA to date

FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.

2.) Supplemental Fee(s): \$138.75 for each year due this office, beginning with 1992 calendar year.

3.) Penalty Fee(s): \$500 penalty fee for each year (report form) is delinquent.

Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with appropriate filing fee.

9. Name and Address of Current Registered Agent

10. If changed, new registered agent/office

JAMES D. CULLEN, ESQUIRE
4501 TAMiami TRAIL NORTH, SUITE 400
NAPLES, FL 34105

CHARLES A. MURRAY, P.A.
1300 THIRD STREET SOUTH STE 302-B
SUITE 302-B
NAPLES FL 34102

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) *Charles A. Murray* DATE 9 Sep 97

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Names of General Partner(s)

Address of Each General Partner (Do NOT Use Post Office Box Numbers)

City, State and Zip Code

11a. Registration Document Number

LTI INTERNATIONAL, INC
f/k/a LTI SALES GROUP, INC.

2150 GOODLETTE ROAD

NAPLES, FL 34105

A94000000174

PREWALTY - \$1,500.00

AR - 1,750.00

SUPP - 415.00

\$ 3,665.00

REINSTATEMENT 1995-1998

600002291846-0

09/12/97-01032-001

***3665.00

AR

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

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 further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE *Timothy Yablonski* DATE 8-4-97

Typed or Printed Name of General Partner Signing Form TIMOTHY YABLONOWSKI, CEO LTI INTERNATIONAL, INC. (941) 649-1316