F00000000129

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 01-03

DOCUMENT # F00000000129

1. Corporation Name
Black Pencil Group, Inc.

2. Principal Office Address		3. Mailing Office Address	
35 West Wacker Drive		35 West Wacker Drive	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Chicago, IL		City & State: Chicago, IL	
Zip: 60601	Country: USA	Zip: 60601	Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: January 7, 2000

5. FEI Number: 36-4347040 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $30.75 Additional fee required for Certified Copy

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: Plantation | State: FL | Zip Code: 33324

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: Connie Bryan CONNIE BRYAN SPECIAL ASSISTANT SECRETARY
REGISTERED AGENT MUST SIGN

Date: 12/02/2003

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/D	Reiner Erfert	Bettinaplatz 6	60325 Frankfurt/M, Germany
S/D	Carla R. Micheloni	35 West Wacker Drive	Chicago, IL 60601
Asst. S	Sondra J. Thorson	35 West Wacker Drive	Chicago, IL 60601

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: Sondra J. Thorson — Sondra J. Thorson — 12/ /03 — 312-220-5959
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FL010 - 10/03/2003 CT System Online

Florida Department of State

Division of Corporations

Public Access System

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CORPORATION REINSTATEMENT

BLACK PENCIL GROUP, INC.

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