

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

01 NOV -9 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F00000002020

1. Corporation Name

AGENTWARE, INC.

Principal Place of Business

Mailing Address

1221 BRICKELL AVE., SUITE 1780
MIAMI FL 33131

1221 BRICKELL AVE., SUITE 1780
MIAMI FL 33131

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

1280 West Peachtree Street

3. New Mailing Office Address, If Applicable

1280 West Peachtree Street

Suite, Apt. #, etc.

Suite 330

Suite, Apt. #, etc.

Suite 330

City & State

Atlanta, GA

City & State

Atlanta, GA

Zip

30309

Country

Zip

30309

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/11/2000

5. FEI Number 58-2543570
APPLIED FOR

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City, State, Zip 4
PD	OTTOLENGHI, LES	1210 OGELTHORPE DRIVE 1280 WEST PEACHTREE STREET, SUITE 330	ATLANTA GA 30319 ATLANTA, GA 30309
VSD	MARTIN, GLENN	1210 OGELTHORPE DRIVE 1280 WEST PEACHTREE STREET, SUITE 330	ATLANTA GA 30319 ATLANTA, GA 30309
AS	DANIEL, BARBARA J	1221 BRICKELL AVE., SUITE 1780	MIAMI FL 33131
D	OGILBY, JOHN J JR. ROGOWSKI, CHRIS	1221 BRICKELL AVE., SUITE 1780 1560 SHERMAN AVE., SUITE 900	MIAMI FL 33131 EVANSTON, IL 60201
D	SICILIAN, JOHN J	1221 BRICKELL AVE., SUITE 1780	MIAMI FL 33131
D	BROOKOVER, BRIAN B	1560 SHERMAN AVE., SUITE 900	EVANSTON IL 60201

8. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE., SUITE 3000
MIAMI FL 33131

9. Name and Address of New 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

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 10/30/01

11. 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:

GLENN MARTIN 11/8/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/01)