

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 NOV 18 PM 12:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F00000002143

1. Corporation Name

Fentress Marine Corporation

2. Principal Office Address

2320 10th St. SE

Suite, Apt. #, etc.

City & State

Largo, FL

Zip

33771

Country

USA

3. Mailing Office Address

c/o Peter Lawrence

Suite, Apt. #, etc.

10 S Wacker Dr. Suite 4000

City & State

Chicago, IL

Zip

60606

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

4/18/2000

5. FEI Number

364350264

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

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

600009048586

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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

Corporation Service Company

REGISTERED AGENT MUST SIGN

Date 11/15/02

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
DP	William V. Glastris, Jr.	200 West Madison Ste. 2710	Chicago, IL 60606
DVPAS	Edward H. Benford	200 West Madison Ste. 2710	Chicago, IL 60606
VPST	David M. Evins	40 Sarasota Center Blvd. Unit A	Sarasota, FL 34240
AS	Roger R. Wilen	10 S. Wacker Dr. Ste. 4000	Chicago, IL 60606

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:

K. R. Wilen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Assistant Secretary

Date

11/12/02

Daytime Phone #

22

FENTRESS MARINE CORPORATION

200 West Madison St.
Suite. 2710
Chicago, IL 60606

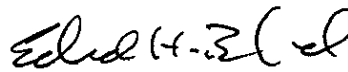
Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Application for Reinstatement for Fentress Marine Corporation

Gentlemen:

We recently received the Notice of Administrative Dissolution or Revocation for Fentress Marine Corporation. However, we have no record that the two prior uniform business reports (UBRs) were received by our office, therefore, we request that you waive the reinstatement fee.

Sincerely,



Edward H. Benford
Vice President



ACCOUNT NO. : 072100000032

REFERENCE : 822428 4320611

AUTHORIZATION : *Patricia Pigott*

COST LIMIT : \$ 300.00

ORDER DATE : November 15, 2002

ORDER TIME : 11:17 AM

ORDER NO. : 822428-010

CUSTOMER NO: 4320611

CUSTOMER: Ms. Elizabeth Hackett
Alzheimer & Gray
10 South Wacker Drive
Suite 4000
Chicago, IL 60606

RECEIVED
02 NOV 18 AM 11:43
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

REINSTATEMENT

NAME: FENTRESS MARINE CORPORATION

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight EX 1156
EXAMINER'S INITIALS _____