PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 AUG 26 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F01000000202

1. Corporation Name
WinTec Arrowmaker, Inc.

2. Principal Office Address	**3.** Mailing Office Address
12821 Old Fort Road	12821 Old Fort Road
Suite, Apt. #, etc.: Suite 302	Suite, Apt. #, etc.: Suite 302
City & State: Fort Washington, MD	City & State: Fort Washington, MD
Zip: 20744-2800 Country: USA	Zip: 20744-2800 Country: USA

200805 Rev MM 8/26

4. Date Incorporated or Qualified To Do Business in Florida: January 12, 2001

5. FEI Number: 52-1741819 ☐ 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

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: Jacqueline N. Casper | Jacqueline N. Casper, Assistant VP | Date: August 23, 2005
REGISTERED AGENT MUST SIGN

CR2E081 (01/04)

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
PCD	Johnny W. Pantages	2429 Stream View Drive	Waldorf, MD 20603
VD	Gerald J. Uttaro	2411 N. Woodrow Street	Alexandria, VA

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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: Gerald J. Uttaro | UTTARO, Gerald J, | 8/18/2005 | (301) 203-0774
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #