
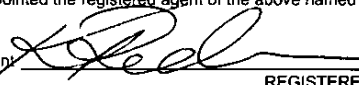
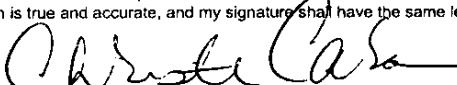


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 07 MAR -2 PM 3:38 SECRETARY OF STATE TALLAHASSEE, FLORIDA <div style="display: flex; align-items: center;"><div style="font-size: 2em; margin-right: 10px;">✕</div><div>900093717269 03/19/07--01027--007 **150.00</div></div> REINSTATEMENT 02-07 CR2E081 (12/05)	
DOCUMENT # F01000005352				
1. Corporation Name COOK SYSTEMS INTERNATIONAL INC. W07-7412				
2. Principal Office Address 6799 GREAT OAKS RD Suite, Apt. #, etc. SUITE 200 City & State MEMPHIS TN Zip 38138		3. Mailing Office Address Suite, Apt. #, etc. City & State Zip Country		
		4. Date Incorporated or Qualified To Do Business in Florida 04/21/1994		
		5. FEI Number 62-1564079 <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable		
		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status		
7. Name and Address of Current Registered Agent				
Name NRAI SERVICES INC Street Address (P.O. Box Number is Not Acceptable) 2731 EXECUTIVE PARK DR Suite, Apt. #, Etc. SUITE 4 City WESTON State FL Zip Code 33331				
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  Date <u>7th Feb 2007</u> <div style="text-align: center;">REGISTERED AGENT MUST SIGN</div>				
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	
PRESIDENT	WAYNE COOK	6799 GREAT OAKS RD SUITE 200	MEMPHIS TN 38138	
VP	JIM FLETCHER	6799 GREAT OAKS RD SUITE 200	MEMPHIS TN 38138	
TREASURER	WAYNE COOK	6799 GREAT OAKS RD SUITE 200	MEMPHIS TN 38138	
SECRETARY	CHRISTINE CARUSO	6799 GREAT OAKS RD SUITE 200	MEMPHIS TN 38138	
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 filling 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 contained in Chapter 119, 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:  Christine Caruso 1/16/07 901.7578877 <div style="display: flex; justify-content: space-between;"><div>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</div><div>Date</div><div>Daytime Phone #</div></div>				