

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 FEB 13 AM 8:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F02000005944**

1. Corporation Name

Verticent, Inc.

700088534037
02/19/07--01002--010 **750.00

2. Principal Office Address - No P.O. Box #

400 N. Ashley Dr.

3. Mailing Office Address

same

Suite, Apt. #, etc.

Suite 2600

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Zip

33602

Country

USA

Zip

Country

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

2003

5. FEI Number

41-2067515

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
~~Verticent, Inc.~~ **Terrence McCarthy**

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

400 No. Ashley Drive

Suite, Apt. #, Etc.

Suite 2600

City
Tampa

State
FL

Zip Code
33602

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

REGISTERED AGENT MUST SIGN

Date

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	Alfred Angelone	10 Speen St	Framingham, MA 01701
T	Terrence C McCarthy	10 Speen St	Framingham, MA 01701

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 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:

Terrence C McCarthy
Terrence C McCarthy

2/9/07 (508) 626-2727

Date

Daytime Phone #

B. Mitchell FEB 13 2007