PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
2009 JUL 29 PM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F03000000036

1. Corporation Name

DexM Corporation

REINSTATEMENT

CR2E081 (12/06)

05-97

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
N22 W23977 Ridgeview Parkway	N22 W23977 Ridgeview Parkway
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Suite 100	Suite 100
City & State	City & State
Waukesha, WI	Waukesha, WI
Zip / Country	Zip / Country
53188 / USA	53188 / USA

4. Date Incorporated or Qualified To Do Business in Florida: 1/3/2003

5. FEI Number: 39-1807517 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: C T 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

☐ 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: Connie Bryan Assistant Secretary — Date: July 29, 2009

REGISTERED AGENT MUST SIGN

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
C/D	Edward R. Pope	N22 W23977 Ridgeview Parkway, Suite 100	Waukesha, WI 53188
P/D	Dennis Burns	9140 Zachary Lane North	Maple Grove, MN 55369
VP	Jon C. Bielefeld	N22 W23977 Ridgeview Parkway, Suite 100	Waukesha, WI 53188
VP/T	David Katina	9140 Zachary Lane North	Maple Grove, MN 55369
S	Betty Pope	N22 W23977 Ridgeview Parkway, Suite 100	Waukesha, WI 53188

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: Edward R. Pope, Chairman/Director — 7/ /09 — 262-523-4670

SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OFFICER OR DIRECTOR — Date — Daytime Phone #

JUL 29 2009

Florida Department of State

Division of Corporations

Public Access System

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CORPORATION REINSTATEMENT

DEXM CORPORATION

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