2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F04000003603 1. Entity Name 08 DEC 22 PM 5: 20 BENETECH INVESTMENTS CORP. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1851 ALBRIGHT ROAD 1851 ALBRIGHT ROAD MONTGOMERY, IL 60538 MONTGOMERY, IL 60538 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 36-3217144 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NRAI SERVICES, INC Street Address (P.O. Box Number is Not Acceptable) 2731 EXECUTIVE PARK DR., SUITE 4 WESTON, FL 3333/1 City Zip Code he purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this statement for the obligations of registered egent. Peter F. Souza SIGNATURE red agent and title if apple SSISTANTOS RCIPETALY signature requ FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2009, Fee will be \$300.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS **▼** Addition TITI F ☐ Channe TITLE Delete Robert Healy 1851 Albright Rd. NAME STEWART, RALPH NAME 3037 BONNIE BRAE CRESCENT STREET ADDRESS STREET ADDRESS Montgomery, IL 40538 CITY-ST-ZIP CITY-ST-ZIP FLOSSMOOR, IL 60422 ☐ Change X Addition TITLE Delete TITLE Robert Powers ZIEGLER, DALE NAME NAME 1851 Albright Rd. STREET ADDRESS 7777 FAY AVENUE, #200 STREET ADDRESS Montgornery, IL 40538 CITY-ST-ZIP LAVOLLA, CA 92037 CLTY - ST - ZIP Change Addition Delete TITLE TITLE Jeffrey Farrero CROSNOE, CLARK NAME NAME 1851 Albright Rd 500 N. AKARD, SUITE 3950 STREET ADDRESS STREET ADDRESS Montagnery, IL (19538 City-St-7IP CITY-S1-ZIP DALLAS, TX 75201 Change Addition Delete TITLE TITLE NAME FLETCHER, F. BARRON III NAME 2<mark>00139210002</mark> /22/08--01061--006 **15 500 N. AKARD, SUITE 3950 STREET ADDRESS STREET ADDRESS **150.00 CITY-ST-ZIP DALLAS, TX 75201 CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE Delete PIRCON, RONALD NAME NAME 1851 ALBRIGHT ROAD STREET ADDRESS STREET ADDRESS MONTGOMERY, IL 60538 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ■ Addition TITLE NAME HERRMAN, JIM NAME 1851 ALBRIGHT ROAD STREET ADDRESS STREET ADDRESS MONTGOMERY, IL 60538 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachment with all accurate hits empowered. of the corporation or the receiver or trustee empo changed, or on an attachment with an address w SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR