

2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000005247

FILED
Oct 02, 2014
Secretary of State

Entity Name: CAPSTONE PROPERTY MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

210 BARTON SPRINGS ROAD, SUITE 300
AUSTIN, TX 78704

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 760
AUSTIN, TX 78767

New Mailing Address:

FEI Number: 74-2566803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JORDAN BROWN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PC
Name: BERKEY, JAMES W
Address: 210 BARTON SPRINGS ROAD, SUITE 300
City-St-Zip: AUSTIN, TX 78704 US

Title: V
Name: LUTZ, MATT C
Address: 210 BARTON SPRINGS ROAD, SUITE 300
City-St-Zip: AUSTIN, TX 78704 US

Title: V
Name: MAZZEI, EDMUND J SR
Address: 1550 MADRUGA AVE, SUITE 150
City-St-Zip: CORAL GABLES, FL 33146 US

Title: V
Name: COBB, HUGH
Address: 222 W LAS COLINAS BLVD, STE 1475E
City-St-Zip: IRVING, TX 75039 US

Title: VS
Name: GETTMAN, MICHAEL D
Address: 210 BARTON SPRINGS ROAD, SUITE 300
City-St-Zip: AUSTIN, TX 78704 US

Title: V
Name: BERKEY, GRANT
Address: 210 BARTON SPRINGS RD, SUITE 300
City-St-Zip: AUSTIN, TX 78704 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL GETTMAN

VS

10/02/2014

Electronic Signature of Signing Officer or Director

Date