12/29/2005 12:20 8502227615 CT CORP PAGE 02/03

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F04000006846

1. Corporation Name
LE-NATURE'S, INC.

2. Principal Office Address	3. Mailing Office Address
Eleven Lloyd Avenue	Eleven Lloyd Avenue
Suite Apt # etc	Suite Apt # etc
City & State: Latrobe, Pennsylvania	City & State: Latrobe, Pennsylvania
Zip: 15650 Country: USA	Zip: 15650 Country: USA

REINSTATEMENT 05

4. Date Incorporated or Qualified To Do Business in Florida: 12/03/2004

5. FEI Number: 251777852 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Name and Address of Current Registered Agent

Name: CT 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

8. I being appointed the registered agent of the above named corporation am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: STEVEN P. ZIMMER SPECIAL ASSISTANT SECRETARY Date: 12-29-05

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
		SEE ATTACHED LIST	

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 under section 119.07(3)(i), 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: Gregory J. Podlesky, Chairman 12/29/2005 724-532-0600

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

FL010 - 9/14/05 CT System Online

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K. Eckel DEC 30 2005

Updated 12/22/05

LE-NATURE'S, INC.

LIST OF DIRECTORS AND OFFICERS

Gregory J. Podlucky	Chairman Chief Executive Officer Treasurer Director	Eleven Lloyd Avenue Latrobe, PA 15650
Jonathan E. Podlucky	Chief Operating Officer Director	Eleven Lloyd Avenue Latrobe, PA 15650
Robert B. Lynn	Vice President General Manager Director	Eleven Lloyd Avenue Latrobe, PA 15650
David Getzik	Chief Financial Officer	Eleven Lloyd Avenue Latrobe, PA 15650
Tammy J. Andreycak	Secretary	Eleven Lloyd Avenue Latrobe, PA 15650
Andrew Murin, Jr	Director	Eleven Lloyd Avenue Latrobe, PA 15650
William D. Thomas	Director	
Venita E. Fields	Director	1007 Church Street, Suite 400 Evanston, Illinois 60201
Ruth J Huet	Director	1007 Church Street, Suite 400 Evanston, Illinois 60201

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Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

LE-NATURE'S, INC.

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