PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

2017 SEP 14 AM 8:04

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name
BUSINESS & DECISION NORTH AMERICA (PA), INC.

000308504900

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
5 GREAT VALLEY PARKWAY	5 GREAT VALLEY PARKWAY
Suite, Apt. #, etc: SUITE 247	Suite, Apt. #, etc: SUITE 247
City & State: MALVERN, PA	City & State: MALVERN, PA
Zip: 19355 Country: USA	Zip: 19355 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 11/6/07

5. FEI Number: 75-3210793 — 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: CORPORATION SERVICE COMPANY
Street Address (P.O. Box Number is Not Acceptable): 1201 HAYS ST.
Suite, Apt. #, Etc:
City: TALLAHASSEE State: FL Zip Code: 32301

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: Emily Croft — Emily Croft, Asst. Vice President
REGISTERED AGENT MUST SIGN

Date: 09/14/2017

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
CEO PRES	CHRISTOPHE DUMOULIN	5 GREAT VALLEY PKWY 247	MALVERN, PA 19355
TREAS	STEVE HOLLINGER	" " " " "	" " "
SEC	JEROME ULMER	" " " " "	" " "
DIR	CHRISTOPHE DUMOULIN	" " " " "	" " "

10. E-mail Address: steve.hollinger@bdna.com
(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath; I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

SIGNATURE: STEVE HOLLINGER — 9/9/17 — 610-230-2500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

SEP 14 2017

L BERGER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 816156 7996429

AUTHORIZATION : 

COST LIMIT : $ 900.00

ORDER DATE : September 13, 2017

ORDER TIME : 9:57 AM

ORDER NO. : 816156-005

CUSTOMER NO: 7996429

REINSTATEMENT

NAME: BUSINESS & DECISION NORTH AMERICA (PA), INC.

XX ___ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XXX ____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner

EXAMINER'S INITIALS _____