

10/17/2017

Division of Corporations

Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT
WHITNEY, BRADLEY & BROWN, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,350.00

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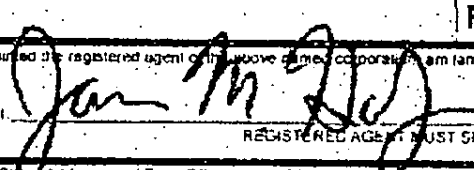
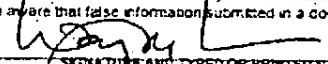
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CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 11000004537					
1. Corporation Name Whiney, Bradley & Brown, Inc.					
2. Principal Office Address - No P.O. Box # 11790 Sunrise Valley Dr. #5 Suite, Apt. #, etc. #5 City & State Reston, VA Zip 20191 Country U.S.A.			3. Mailing Office Address 11790 Sunrise Valley Dr. #5 Suite, Apt. #, etc. #5 City & State Reston, VA Zip 20191 Country U.S.A.		
4. Date Incorporated or Qualified To Do Business in Florida November 10, 2011			5. FEI Number Applied For ☒ Not Applicable		
6. CERTIFICATE OF STATUS DESIRED			\$0.75 Additional Fee required for a Certificate of Status		
7. Name and Address of Current Registered Agent Name C.T. Corporation System Inc. 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 617.3503 F.S. Signature of Registered Agent:  Date: 10/17/2017 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 Officer and/or Director	Street Address of Each Officer and/or Director		City / State / Zip	
D	Paul G. Yovovich	875 N Michigan Avenue, Suite 3520		Chicago, IL 60611	
D	Kevin Rowe	875 N Michigan Avenue, Suite 3520		Chicago, IL 60611	
D/VP	Douglas C. Rescho	875 N Michigan Avenue, Suite 3520		Chicago, IL 60611	
D/CEO	William McMullen	11790 Sunrise Valley Dr. #5		Reston, VA 20191	
D/VP C	Wayne Wilkinson	11790 Sunrise Valley Dr. #5		Reston, VA 20191	
Sec. Tre	Michael J. Hayes	875 N Michigan Avenue, Suite 3520		Chicago, IL 60611	
10. E-mail Address: <u>ymarsdon@wbbrine.com</u> (To be used for future annual report notification)					
11. I certify that I am an officer or director of 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:  <u>Wayne Wilkinson</u> 10/16/17 (703) 448-6001 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					