Page 1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 AUG -5 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F71810

1. Corporation Name
The Consulting Source, Inc.

| 2. Principal Office Address | 3. Mailing Office Address |
|---|---|
| 110 SE 6th Street | 110 SE 6th Street |
| Suite, Apt. #, etc. 20th Floor | Suite, Apt. #, etc. 20th Floor |
| City & State Fort Lauderdale, FL | City & State Fort Lauderdale, FL |
| Zip 33301 Country USA | Zip 33301 Country USA |

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 59-2183874 ☐ 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: Judith Bernero

Street Address (P.O. Box Number is Not Acceptable): 110 SE 6th Street

Suite, Apt. #, Etc.: 20th Floor

City: Fort Lauderdale | State: FL | Zip Code: 33301

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: Judith Bernero — Date: 7/28/03
REGISTERED AGENT MUST SIGN

CR2E051 (R/02)

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 |
|---|---|---|---|
| DP | Michael E. Maroone | 110 SE 6th Street | Fort Lauderdale, FL 33301 |
| DVPS | Jonathan P. Ferrando | 110 SE 6th Street | Fort Lauderdale, FL 33301 |
| T | Marc L. Bourhis | 110 SE 6th Street | Fort Lauderdale, FL 33301 |
| | | | |
| | | | |
| | | | |

02-03 TS

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: _____ 7/28/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

# Florida Department of State
Division of Corporations
Public Access System

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## CORPORATION REINSTATEMENT

**THE CONSULTING SOURCE, INC.**

| | |
|---|---|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | $900.00 |