

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

**Katherine Harris**  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **F93000002707**

1. Corporation Name

Information **Graphics Systems, Inc.**

2. Principal Office Address  
**5777 Central Avenue**

3. Mailing Office Address  
**Same**

Suite, Apt. #, etc.  
**200**

Suite, Apt. #, etc.

City & State  
**Boulder, CO**

City & State

Zip  
**80301**

Country  
**USA**

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida **06/11/93**

5. FEI Number  
**84-1066687**

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required  
for a Certificate of Status

**500004552165--0**  
**-08/23/01--01005--019**  
**\*\*\*1800.00 \*\*\*1800.00**

**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 617.0503, F.S.

Signature of  
Registered Agent

*Christen Noakes*

Date **07/12/01**

REGISTERED AGENT MUST SIGN

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
Pres.	Rick Joyce	5777 Central Ave, Suite 200	Boulder, CO 80301
VP	Linda Alexander	5777 Central Ave, Suite 200	Boulder, CO 80301
Sec/Tre	Jonathan Bein	5777 Central Ave, Suite 200	Boulder, CO 80301

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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8 / /01

Date

303-448-3676

Daytime Phone #

**CT CORPORATION SYSTEM**

August 17, 2001

Attn: Susan Payne  
Division of Corporations  
409 East Gaines St.  
Tallahassee, Florida 32399  
Corporate Information Phone: (850) 488-9000

Re: Information & Graphics Systems, Inc. - Reinstatement  
and Withdrawal  
Order #: 3496349

Dear Susan:

Please reinstate and withdraw Information & Graphics Systems, Inc., a **Colorado** domestic corporation. As per our conversation, this entity was revoked on August 25, 1994. Since then, an new company, with the same name, qualified in the state of Florida in 1999 (as a **Delaware** corporation). As a result the name is unavailable for Reinstatement.

As per your instruction, I am sending this to your attention with the understanding that the state will make an exception for reinstatement since the entity will subsequently withdraw. If you have any questions or if for any reason the filing cannot be effected promptly, you may contact me at 1-800-362-1228. Thank you for your assistance.

Very truly yours,



Phyllis Rodela  
Corporate Customer Specialist

Enclosures

1675 Broadway  
Suite 1200  
Denver, CO 80202  
Tel. 303 629 2500  
Fax 303 629 2525