

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		AND FILED 96 NOV -5 AM 9:55 SECRETARY OF STATE TALLAHASSEE, FLORIDA 500001899915--5 -11/03/96--01019--007 *****375.00 *****375.00	
DOCUMENT # F94000000737					
1. Corporation Name Wolf D. Bartl Company, Inc.					
Principal Place of Business 721 Chestnut St. Philadelphia, PA 19106			Mailing Address 721 Chestnut St. Philadelphia, PA 19106		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable		3. New Mailing Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 2/15/94	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 23-1733470	
City & State		City & State		Applied For Not Applicable	
Zip		Country		6. CERTIFICATE OF STATUS DESIRED ☐	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip		
CPS	Colgan, Dennis Jr.	12 Cove Road	Moorestown, NJ 08057		
C	Stevenson, William	108 Mansion Drive	Media, PA 19063		
VT	Ercolani, John D.	2 Devon Road	Cinnaminson, NJ 08077		
V	Baird, Kenneth J.	12 Green Ridge	Yardley, PA 19067		
V	Chin Quee, Robert	1095 Midland St.	Uniondale, NY 11553		
CEOS	Colgan, Dennis Jr.	12 Cove Road	Moorestown, NJ 08057		
8. Name and Address of Current Registered Agent The Prentice-Hall Corporation System, Inc. 1201 Hays St, Suite 105 Tallahassee, FL 32301			9. Name and Address of New Registered Agent Name: [Blank] Street Address (P.O. Box Number is Not Acceptable): [Blank] Suite, Apt. #, Etc.: [Blank] City: [Blank] State: FL Zip Code: 11-5-96		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent: <i>Karen B. Rozar</i> Karen B. Rozar, As Agent Date: 11-5-96 REGISTERED AGENT MUST SIGN					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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. 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: <i>John D. Ercolani</i> John D. Ercolani Date: October 14, 1996 215-238-8657 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR23040 (12/95)