

OCT. 13. 2008 1:39PM

C S C

NO. 075 P. 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2008 OCT 13 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000000737

1. Corporation Name:

BARTHECO INTERNATIONAL, INC.

2. Principal Office Address - No P.O. Box #

7101 EXE. CTR DR.

Suite, Apt. #, etc.

SUITE 333

City & State

BRENTWOOD, TN

Zip

37027

Country

USA

3. Mailing Office Address

5101 SOUTH BROAD ST

Suite, Apt. #, etc.

City & State

PHILADELPHIA PA

Zip

19112

Country

USA

CR2E081 (12/07)

4. Date Incorporated or Qualified
To Do Business in Florida

02/15/1994

5. FEI Number

23-1733430

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$2.75 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., STE. 105

Suite, Apt. #, Etc.

City

TALLAHASSEE

State

FL

Zip Code

32301

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

REGISTERED AGENT MUST SIGN

Date

10/13/08

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	SCOTT MCWILLIAMS	7101 EXE CTR DR STE 333	BRENTWOOD, TN 37027
SEC	FRANK EICHLER	7101 EXE CTR DR STE 333	BRENTWOOD, TN 37027
EVP	BERT IRIGOYEN	7101 EXE CTR DR STE 333	BRENTWOOD, TN 37027

REINSTATEMENT
07-08
p/s

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 corporation 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 contained in Chapter 119, 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

Frank Eichler

Date

10/8/08 615-401-6400

Daytime Phone #

OCT. 13. 2008 1:39PM

C S C

NO. 075

P. 1

Florida Department of State

Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

Kimberly K 2949

CORPORATION REINSTATEMENT

BARTHCO INTERNATIONAL, INC.

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

200.00

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that notices
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