

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 MAR 17 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *F94000002275*

1. Corporation Name

Global Exchange Services, Inc.

2. Principal Office Address

100 Edison Park Drive

Suite, Apt. #, etc.

City & State

Gaithersburg, MD

Zip

20878

Country

USA

3. Mailing Office Address

100 Edison Park Drive

Suite, Apt. #, etc.

City & State

Gaithersburg, Maryland

Zip

20878

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

3/9/94

5. FEI Number

52-1865641

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

CT Corporation System

600048983046

*03/23/05--01014--009 **1050.00*

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, do hereby accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Stacy M. Rosenthal
**Vice President and
Assistant Secretary**

REGISTERED AGENT MUST SIGN

Date

3/14/2005

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.	<i>Gary Greenfield</i>	<i>100 Edison Park Drive</i>	<i>Gaithersburg, Md 20878</i>
VP.	<i>Rowland Archer</i>	<i>Same</i>	<i>Same</i>
Sec.	<i>Bruce Hunter</i>	<i>Same</i>	<i>Same</i>
Treas.	<i>Lou Salamone</i>	<i>Same</i>	<i>Same</i>
Dir.	<i>Bruce Hunter</i>	<i>Same</i>	<i>Same</i>
Dir.	<i>Lou Salamone</i>	<i>Same</i>	<i>Same</i>

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:

Bruce Hunter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/2005
Date

(301)346-4828
Daytime Phone #

CR2E081 (01/05)