PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 NOV 19 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94 000002842

1. Corporation Name
IPCG, Inc. dba
IPCG of Delaware, Inc.

Principal Place of Business
15 South Main Street
Suite 900
Greenville SC 29601

Mailing Address
Po Box 1807
Greenville SC 29602

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

4. Date Incorporated or Qualified To Do Business in Florida: May 31, 1994

5. FEI Number: 57-1057296 | Applied For | Not Applicable

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

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

100003053397--3
-11/23/99--01069--020
****908.75 ****908.75

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City, State, Zip 4
D/P	Stephen B. Siegel	200 Park Avenue	New York, NY 10166
SrV/S	Adam B. Gilbert	200 Park Avenue	New York, NY 10166
SrV/T	Ronald Uretta	200 Park Avenue	New York, NY 10166
SrV	Alan Ballew	15 South Main Street, Ste 900	Greenville SC 29601
V	Edgar Moore	15 South Main Street, Ste 900	Greenville SC 29601
AS	Yvonne Owens	15 South Main Street, Ste 900	Greenville SC 29601

8. Name and Address of Current Registered Agent

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
REINSTATEMENT 98-99 | TS
City | State: FL | Zip Code

CR2E081 (12/98)

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: Connie Bryan
CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
REGISTERED AGENT MUST SIGN

Date: 11/19/99

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☑ (obtained extension) No ☐ (See other side for information on intangible tax.)

12. 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: Yvonne Owens Yvonne Owens, Asst. Secretary 11/18/99 (864)298-8400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #