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APPLICATION FOR REINSTATEMENT FOR Gradient Corporation

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS 96

DO NOT WRITE IN THIS SPACE

FILED
DEC -6 AM 7:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Read Instructions on Other Side Before Making Entries
Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation: DOCUMENT # F94000005532(6)
Gradient Corporation
44 Brattle Street
Cambridge, MA 02138

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.
Address
Address
City and State
Zip Code

3. Date Incorporated or Qualified To Do Business in Florida 10/25/94

4. FEI Number 04-2857447
☐ FEI Number Applied For
☐ FEI Number Not Applicable

5. Names and Street Addresses of Each Officer and/or Director

1 Title	2 Names of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City and State
T	Neil S. Shifrin	80 Ash Street	Weston, MA 02193
Asst. T	Philip H. Ockelmann	2008 Belmont Lane	Redondo Beach, CA 90278
D	Joseph K. Register Jr.	6685 Windwood	West Chester, OH 45069

REGISTERED AGENT INFORMATION

6. Name and Address of Current Registered Agent
CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

7. Name and Address of New Registered Agent
Name: The Prentice-Hall Corporation System, Inc.
Street Address (Do NOT Use P.O. Box Number): 1201 Hays Street
Street Address (Do NOT Use P.O. Box Number): Suite 105
City and State: Tallahassee FL
Zip Code: 32301

8. 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: The Prentice Hall Corporation System, Inc. By: A. P. Polizzi, Asst. VP Date: 12/04/96
REGISTERED AGENT MUST SIGN

9. 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 of Officer or Director: Date 11/26/96 Phone # (310) 378-9933
Typed or printed name of signing officer or director: Philip H. Ockelmann

10. Should you desire a certificate of status check the box.
CERTIFICATE OF STATUS DESIRED ☐

$8.75 Additional fee required for Certificate of Status

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GRADIENT CORPORATION
44 Brattle Street
Cambridge, Massachussets 02138

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Directors

Register, Jr., Joseph K.

Officers

Shifrin, Neil S.	Treasurer
Ockelmann, Philip H.	Assistant Treasurer

1201 HAYS STREET
TALLAHASSEE, FL 32301-2607
904-222-9171
904-222-0393 FAX

800-342-8086

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F94000005532

CSC networks

PRENTICE HALL
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 176411 4388818

AUTHORIZATION : Patricia Pyzuit

COST LIMIT : $ 375.00

ORDER DATE : December 4, 1996

ORDER TIME : 3:31 PM

ORDER NO. : 176411-005

CUSTOMER NO: 4388818

200002021562--8

CUSTOMER: Ms. Connie S. Wiersma
IT CORPORATION

23456 Hawthorne Blvd.

Torrance, CA 90505

DOMESTIC FILING

NAME: GRADIENT CORPORATION

EFFECTIVE DATE:

RECEIVED
96 DEC -5 PM 4:12
DIVISION OF CORPORATION

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Juan E Jones

EXAMINER'S INITIALS: MWB