

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

01 MAY 17 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F95000002218**

1. Corporation Name

Spatco Environmental Inc.

2. Principal Office Address

5100 North I-85

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite 7

Suite, Apt. #, etc.

City & State

Charlotte, NC

City & State

Zip

28206

Country

USA

Zip

Country

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

4/14/95

5. FEI Number

56-1903158

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

S00221900374--9
-05/17/01--01007--022
****650.00 ****650.00

7. Name and Address of Current Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

S00221900374--9
-08/02/00--90152--044
****550.00 ****550.00

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

Dale W. Morris

DALE W. MORRIS

ASSISTANT VICE PRESIDENT

Date

5.10.01

REGISTERED AGENT MUST SIGN

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
P	McAllen Finley	2506 Grandview Ave.	Nashville, TN 37211
V	Gary Ladd	6508 Baum Dr.	Knoxville, TN 37919
S	Jackie Utley	130 Penmarc Dr., Ste 108	Raleigh, NC 27603
D	Mike Pappas	1100 Kenilworth	Charlotte, NC 28203
D	Harry Leventus	1100 Kenilworth	Charlotte, NC 28203
D	Paul Stackhouse	1100 Kenilworth	Charlotte, NC 28203

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:

Jackie Utley
JACKIE UTLEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

S. PAYNE

MAY 18 2001

5/11/01
Date

919-832-2535
Daytime Phone #