

PAfiled

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLET...

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



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

DOCUMENT # **F95000004437**

1. Corporation Name

QuestPoint G.P., Inc.

2. Principal Office Address

401 Market Street

Suite, Apt. #, etc.

P.O. Box 7618

City & State

Philadelphia, PA

Zip

19101

Country

USA

3. Mailing Office Address

1339 Chestnut Street

Suite, Apt. #, etc.

Legal Dept. (PA4840)

City & State

Phildelphia, PA

Zip

19107

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

9/13/95

5. FEI Number

232799031

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

Corporation Service Company

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State  
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 or 617.0503, F.S.

Signature of  
Registered Agent

*Deborah D. Skipper*

**Deborah D. Skipper**  
as its agent

Date

8-1-00

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/T/D	Ruth J. Brader	1339 Chestnut Street	Philadelphia, PA 19107
VP/ Sec.	Jacqueline A. Ballantine	1339 Chestnut Street	Philadelphia, PA 19107
AVP/ Asst. Sec.	William H. Schwartz	1339 Chestnut Street	Philadelphia, PA 19107

**REINSTATEMENT 99-00 TS**

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:

*Ruth J. Brader*

Ruth J. Brader

7/31/00

Date

215-973-7236

Daytime Phone #

1



ACCOUNT NO. : 072100000032

REFERENCE : 782894 7170545

AUTHORIZATION :

COST LIMIT : \$ 900.00

*Patricia Pajot*

ORDER DATE : August 1, 2000

ORDER TIME : 10:40 AM

ORDER NO. : 782894-005

CUSTOMER NO: 7170545

CUSTOMER: Ms. Jackie A. Ballantine  
FIRST UNION CORPORATION  
FIRST UNION CORPORATION  
Legal Dept. Pa 4840  
1339 Chestnut Street  
Philadelphia, PA 19107

DOMESTIC FILING

NAME: QUESTPOINT G.P., INC.

EFFECTIVE DATE:

XX REINSTATEMENT  
       CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS

*De 184*

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00 AUG - 1 PM 12:18  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA