

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR 47-90 REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000005548**

1. Corporation Name

MINET SETTLEMENT SERVICES, INC.

Principal Place of Business 123 N. WACKER DR. CHICAGO, IL 60606	Mailing Address TAX DEPARTMENT PO BOX 8264 CHICAGO, IL 60680
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

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

4. Date Incorporated or Qualified To Do Business in Florida	11/13/1995
5. FEI Number	93-0900259
6. CERTIFICATE OF STATUS DESIRED	<input type="checkbox"/> \$0.75 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)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
P	Saffir S. Pavittar	1100 Johnson Ferry Rd.	Atlanta, GA 30342
AVP	Susan Fyda	123 N. Wacker Dr.	Chicago, IL 60606
T	Charles Caporale	199 Water St, 21st Flr	New York, NY 10038
S	Robert G. Reidy	220 E 42nd St, 21st Flr	New York, NY 10017

REINSTATEMENT

8. Name and Address of Current Registered Agent <i>same</i>	9. Name and Address of New Registered Agent
The Prentice Hall Corporation System, Inc. 1201 Hays St., Suite 105 Tallahassee, FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code

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 *Susan M. Pavittar* **REGISTERED AGENT MUST SIGN** Date *7/15/98*

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ 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: *Susan Fyda* **SUSAN FYDA** Date *06/10/98* 312 7013978

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR