

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

DIVISION OF CORPORATIONS

FILED

98 OCT -9 PM 2:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

SLI Inc.

F95000005657

Principal Place of Business

Mailing Address

5 Concourse Parkway, Ste 2400  
Atlanta, Georgia 30328

5 Concourse Parkway, Ste  
2400  
Atlanta, Georgia 30328

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 Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT 97-98

4. Date Incorporated or Qualified  
To Do Business in Florida

November 20, 1995

5. FEI Number

22-2019853

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

See Additional Fees 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
See 1 in Addendum			

8000012662678--0

-10/13/98--01049--014

\*\*\*\*\*900.00 \*\*\*\*\*900.00

8000012662678--0

-10/13/98--01049--015

\*\*\*\*\*8.75 \*\*\*\*\*8.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

The Prentice-Hall Corporation System, Inc.  
1201 Hays Street  
Tallahassee, FL 32301

Name

CT Corporation Systems

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

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

Mary R. Adams

MARY R. ADAMS

ASSISTANT SECRETARY

Date

October 7, 1998

REGISTERED AGENT MUST SIGN

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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.

Leslie O. Jones

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR

October 6, 1998

Date

(770) 392-6705

Daytime Phone #

CR2E040 (12/95)

①

## Addendum

1. Title: Vice President/Director  
Name: John H. Watson  
Street address: 5 concourse Pkwy, Ste 2400  
City, State and Zip: Atlanta, GA 30328  
  
Title: Treasurer  
Name: Thomas G. Delaney  
Street address: 5 Concourse Pkwy, Ste 2400  
City, State and Zip: Atlanta, GA 30328  
  
Title: Secretary  
Name: Leslie O. Jones  
Street address: 5 Concourse Pkwy, Ste 2400  
City, State and Zip: Atlanta, GA 30328  
  
Title: Assistant Secretary  
Name: Jack L. McNeese  
Street address: 5 Concourse Pkwy, Ste 2400  
City, State and Zip: Atlanta, GA 30328  
  
Title: Director  
Name: Douglas M. Yates  
Street address: 5 Concourse Pkwy, Ste 2400  
City, State and Zip: Atlanta, GA 30328