PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 04-05

DOCUMENT # F96000003696

1. Corporation Name
Laidlaw Transit Services, Inc.

2. Principal Office Address		3. Mailing Office Address	
5360 College Blvd.		5360 College Blvd.	
Suite, Apt. #, etc. 200		Suite, Apt. #, etc. 200	
City & State: Overland Park, KS		City & State: Overland Park, KS	
Zip: 66211	Country: US	Zip: 66211	Country: US

4. Date Incorporated or Qualified To Do Business in Florida: 07/22/1996

5. FEI Number: 52-1929641 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

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 Rd.
Suite, Apt. #, Etc.:
City: Plantation State: FL Zip Code: 33324

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: Connie Bryan Special Asst. Secty Date: 9/23/05
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
Dir.	Kevin Edgar Benson	55 Shuman Boulevard #400	Naperville, IL 60563
Pres.	Michael Rushin	55 Shuman Boulevard #400	Naperville, IL 60563
V. Pres.	Beverly A Wyckoff	55 Shuman Boulevard #400	Naperville, IL 60563
Sect.	Beverly A Wyckoff	55 Shuman Boulevard #400	Naperville, IL 60563

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: Beverly A. Wyckoff 9-21-05 630 848-3035
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E081 (07/05)

Florida Department of State

Division of Corporations

Public Access System

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CORPORATION REINSTATEMENT

LAIDLAW TRANSIT SERVICES, INC.

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