FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

00 APR 26 PM 3:43

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 APR 26 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000001077

1. Corporation Name

Fifth Third Securities, Inc.

Principal Place of Business	Mailing Address
38 Fountain Square Plaza Cincinnati, Ohio 45263	

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 99.00
DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable	3. New Mailing Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida
Suite, Apt. #, etc.	Suite, Apt. #, etc.	3/3/97
City & State	City & State	5. FEI Number: 31-0961769 ☐ Applied For ☐ Not Applicable
Zip / Country	Zip / Country	6. CERTIFICATE OF STATUS DESIRED ☐

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
President	Peter G. Bielan	38 Fountain Square Plaza	Cinti., OH 45263
Vice Pres.	Thomas Williams	same as above	same as above
Secretary	Paul L. Reynolds	same as above	same as above
Treasurer	John P. Wallace	same as above	same as above
Director	George A. Schaefer, Jr.	same as above	same as above
Director	Michael K. Keating	same as above	same as above

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-05/11/00 01039 020
*****900.00 *****900.00

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
Bryan Haley 4099 Tamiami Trail N Naples, FL 34103	Name: C T Corporation System Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Rd. Suite, Apt. #, Etc.: City: Plantation State: FL Zip Code: 33324

CR2E040 (12/95)

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: Connie Bryan Connie Bryan, Special Asst. Secretary Date: 4-26-00
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.

SIGNATURE: Paul L Reynolds Secretary April 25, 2000 (513) 579-5193
SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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