PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

06 FEB 27 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000001382

1. Corporation Name

J.R. GRIMES CONSULTING ENGINEERS, INC.

400067464954
03/09/06--01026--026 **1658.75
CR2E081 (12/05)

2. Principal Office Address	3. Mailing Office Address
12300 OLD TESSON ROAD	12300 OLD TESSON ROAD
Suite, Apt. #, etc.: SUITE 300D	Suite, Apt. #, etc.: SUITE 300D
City & State: SAINT LOUIS, MO	City & State: SAINT LOUIS, MO
Zip: 63128 Country: SAINT LOUIS	Zip: 63128 Country: SAINT LOUIS

4. Date Incorporated or Qualified To Do Business in Florida: 03/18/1997

5. FEI Number: 43-1751270 ☐ 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: CT CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable): 1200 SOUTH PINE ISLAND ROAD

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: J.L. Miles-Asst. Secy. Date: FEBRUARY 23, 2006

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/D	JOSEPH R. GRIMES	12300 OLD TESSON ROAD	SAINT LOUIS, MO 63128
V	LEONARD J. MEERS	12300 OLD TESSON ROAD	SAINT LOUIS, MO 63128
S	TINA OSTER	12300 OLD TESSON ROAD	SAINT LOUIS, MO 63128
		REINSTATEMENT 00-06	

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 contained in Chapter 119, 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: Tina Oster, TINA OSTER, SECRETARY 2/24/2006 314-849-6100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #