

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H1000221459 3)))



H10002214593ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6384

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

*ATTN:
Sean Toner
Please charge
\$900.00*

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

CORPORATION REINSTATEMENT
KINKO'S NETWORK, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,050.00

\$900.00

Electronic Filing Menu


Corporate Filing Menu

Help

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10 OCT -8 AM 9:58
 FLORIDA DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F97000001998
 1. Corporation Name
 Kinko's Network, Inc.

2. Principal Office Address - No P.O. Box # 13155 Noel Road		3. Mailing Office Address 13155 Noel Road	
Subs. Apt. #, etc. Suite 1600		Subs. Apt. #, etc. Suite 1600	
City & State Dallas Texas		City & State Dallas Texas	
Zip 75240	Country USA	Zip 75240	Country USA

REINSTATEMENT 08-10
 CR2E081 (6/10)

4. Date Incorporated or Qualified To Do Business in Florida 4/16/1997
 5. FEI Number 77-0443979
 Applied For Not Applicable
 6. CERTIFICATE OF STATUS DESIRED State Additional fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
 C T Corporation System

Street Address (P.O. Box Number is Not Acceptable)
 1800 South Pine Island Road

Suite, Apt. #, Etc.

City
 Plantation

State
 FL

Zip Code
 33324

05-02-09 90124 - 605*150.00
 10/8

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0606 or 817.0603, F.S.

Signature of Registered Agent *James M. Halpin* James M. Halpin Assistant Secretary Date 10/8/2010
 REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Please nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Brian D. Philips	13155 Noel Rd., Ste. 1600 Dallas, Tx 75240	
VP/T/D	Leslie M. Benners	13155 Noel Rd., Ste. 1600 Dallas, Tx 75240	
VP/S	Frederic C. Liskow	13155 Noel Rd., Ste. 1600 Dallas, Tx 75240	
VP/AT	Hugh A. Skinner	942 S. Shady Grove Rd. Memphis, TN 38120	
VP/AT	John W. Bell	942 S. Shady Grove Rd. Memphis, TN 38120	
VP/AS	Tracy B. Brightman	13155 Noel Rd., Ste. 1600 Dallas, Tx 75240	

10. E-mail Address: linda.hall@fedex.com
(To be used for future annual report notification)

11. 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 817 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 807.0401 or 817.0401, F.S., that all fees owed by the corporation have been paid. I further certify, 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: *Frederic C. Liskow* Frederic C. Liskow, VP & Assistant Secretary 10/5/10 214-550-7600
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #