Florida Department of State
Division of Corporations
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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

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

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CORPORATION REINSTATEMENT
ARAMARK FOOD AND SUPPORT SERVICES GROUP, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$2,700.00

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CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

12 MAR 14 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F98000000459

1. Corporation Name
ARAMARK FOOD AND SUPPORT SERVICES GROUP, INC.

REINSTATEMENT

CR2E081 (11/10) 11-12

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
1101 Market Street		same as principal	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Philadelphia, PA			
Zip	Country	Zip	Country
19107	Philadelphia		

4. Date Incorporated or Qualified To Do Business in Florida 01/26/1998

5. FEI Number 23-2573585 ☐ 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: C T Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road

Suite, Apt. #, Etc.:

City	State	Zip Code
Plantation	FL	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 617.0505, F.S.

Signature of Registered Agent: Margaret E Routzahn MARGARET E. ROUTZAHN Date 3/14/12
REGISTERED AGENT MUST SIGN Special Assistant Secretary

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

Titles (Director, President, V.P., Treasurer, Secretary)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	L. FREDERICK SUTHERLAND	1101 MARKET STREET	PHILADELPHIA, PA 19107
V.P.	PATRICIA RAPONE	1101 MARKET STREET	PHILADELPHIA, PA 19107
Treasurer Director	CHRISTOPHER HOLLAND	1101 MARKET STREET	PHILADELPHIA, PA 19107
Secy	MEGAN TIMMINS	1101 MARKET STREET	PHILADELPHIA, PA 19107

10. E-mail Address: Conville-deborah@aramark.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 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. 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; I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: Patricia Rapone 3/8/2012 215-239-3162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FLR98 - 01.14.2011 CT System Online

PATRICIA RAPONE, VICE PRESIDENT