

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 JUN 24 AM 8:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F98000000689

1. Corporation Name

The InterCept Group, Inc.

2. Principal Office Address

3150 Holcomb Bridge Road

3. Mailing Office Address

3150 Holcomb Bridge Road

Suite, Apt. #, etc.

Suite 200

Suite, Apt. #, etc.

Suite 200

City & State

Norcross, Georgia

City & State

Norcross, Georgia

Zip

30071

Country

USA

Zip

30071

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

02/05/1998

5. FEI Number

58-2237359

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

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

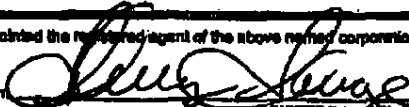
Suite, Apt. #, Etc.

City

PLANTATION

State
FLZip Code
33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0605 or 817.0903, F.S.

Signature of
Registered AgentShelley Savage
Vice President

Date 6-24-03

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida 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
CEO, D	John W. Collins	3150 Holcomb Bridge Rd, Suite 200	Norcross, GA 30071
P	G. Lynn Boggs	3150 Holcomb Bridge Rd, Suite 200	Norcross, GA 30071
CFO/S	Scott R. Meyerhoff	3150 Holcomb Bridge Rd, Suite 200	Norcross, GA 30071

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 807 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 and the names of individuals listed on this form do not qualify for an exemption under section 118.07(3)(f), 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:



(770)248-9800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

THE INTERCEPT GROUP, INC.

Certificate of Status	1
Certified Copy	0
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