

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

01 JAN 10 AM 9:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #**

1. Corporation Name **F98000002183**

CANDLEWOOD LEASING NO. 2, INC.

**2. Principal Office Address**

8621 E. 21ST ST. N.

Suite, Apt. #, etc.

SUITE 200

City & State

WICHITA KS

Zip

Country

67206

USA

**3. Mailing Office Address**

8621 E. 21ST ST. N.

Suite, Apt. #, etc.

SUITE 200

City & State

WICHITA KS

Zip

Country

67206

USA

**REINSTATEMENT**

2000

**4. Date Incorporated or Qualified  
To Do Business in Florida**

04/17/1998

**5. FEI Number**

48-1200458

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

*See Attached*

Date

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
CEO	JACK P DEBOER	8621 E. 21ST ST. N., # 200	WICHITA, KS 67206
PRES	JAMES E ROOS	8621 E. 21ST ST. N., # 200	WICHITA, KS 67206
SECR	WARREN D FIX	8621 E. 21ST ST. N., # 200	WICHITA, KS 67206
VPCONT	THOMAS KENNALLEY	8621 E. 21ST ST. N., # 200	WICHITA, KS 67206
VP	JEFFREY F HITZ	8621 E. 21ST ST. N., # 200	WICHITA, KS 67206
VP	CHARLES H ARMSTRONG JR	8621 E. 21ST ST. N., # 200	WICHITA, KS 67206

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 under section 119.07(3)(i), 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:

*Thomas Kennally*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/28/00 Thomas Kennally 316-630-5520  
Daytime Phone #

2084

Officers  
Attachment

Name/Address

Title

Tim D. Johnson  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Vice-President-Treasurer, Assistant Secretary

H. Steve Meadows  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Vice-President-Operations

David A. Redfern  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Vice-President-Sales & Marketing

Gina-Lynne Scharoun  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Vice-President-Franchise Services

Directors  
Attachment

Name/Address

Jack P. DeBoer  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Mariel C. Albrecht  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Gary E. Costley  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Robert J. Cresci  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Warren D. Fix  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Thomas L. Keltner  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Robert S. Morris  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Thomas H. Nielsen  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Frank J. Pados, Jr.  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

William L. Perocchi  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Tony M. Salazar  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

Thomas W. Storey  
8621 E. 21st St. N., Suite 200  
Wichita, KS 67206

3  
9  
X

4 of 4

# ACCEPTANCE OF APPOINTMENT


RE: **Candlewood Leasing No. 2, Inc.**

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: December 28, 2000

C T CORPORATION SYSTEM

By

  
Jonathan L. Miles,  
Assistant Secretary

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

DOCUMENT # **H63849**

1. Corporation Name

**RINK REYNOLDS DIAMOND FISHER WILSON, P.A.**

01 JAN 10 AM 11:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

1200 RIVERPLACE BLVD.  
SUITE 200  
JACKSONVILLE FL 32207  
US

Mailing Address

1200 RIVERPLACE BLVD.  
SUITE 200  
JACKSONVILLE FL 32207  
US

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

1301 Riverplace Blvd

City & State JAX, FL Ste 500

Zip 32207 Country Duval

Suite, Apt. #, etc.

1301 Riverplace Blvd

City & State JAX, FL Ste 500

Zip 32207 Country Duval

**REINSTATEMENT 2000**

4. Date Incorporated or Qualified  
To Do Business in Florida

06/25/1985

5. FEI Number

59-2584959

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

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

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
S	FISHER, THOMAS J	1301 RIVER PL BLVD. STE. 500	JACKSONVILLE FL 32207
P	<del>RINK, JAMES E JR</del> <i>Delete name - deceased</i>	<del>1301 RIVER PL BLVD. STE. 500</del>	<del>JACKSONVILLE FL 32207</del>
V	REYNOLDS, THOMAS W JR	1301 RIVER PL BLVD. STE. 500	JACKSONVILLE FL 32207
TD	DIAMOND, JOHN J	1301 RIVER PLACE BLVD. STE. 500	JACKSONVILLE FL 32207
D	Wilson, Larry	1301 Riverplace Blvd Ste 500	Jax, FL 32207

8. Name and Address of Current Registered Agent

~~RINK, JAMES E, JR.~~  
~~1200 RIVERPLACE BLVD.~~  
~~SUITE 200~~  
JACKSONVILLE FL 32207

9. Name and Address of New Registered Agent \*\*\*500.00

Name

Stacey Marklow

Street Address (P.O. Box Number is Not Acceptable)

1301 Riverplace Blvd

Suite, Apt. #, Etc.

500

City

Jax

200003568142-6

-01/24/01-01001-003

\*\*\*500.00

200003568142-6

-01/24/01-01001-004

\*\*\*\*1501 FL \*\*\*\*1501-007

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

*Stacey Marklow*

REGISTERED AGENT MUST SIGN

Date

11/8/00

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., 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 119.07(3)(i), 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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8 NOV 00

Date

904/3906353

Daytime Phone #

CR2ED40 (8/00)