APPLICATION FOR REINSTATEMENT

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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # **F98000002215**

1. Corporation Name

ER SOLUTIONS, INC.

Principal Place of Business	Mailing Address
1016 E. PIKE ST. SEATTLE WA 98122	1016 E. PIKE ST. SEATTLE WA 98122

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

REINSTATEMENT 2000

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
500 SW 7th Street	P O Box 9004
Suite, Apt. #, etc.: Suite A100	Suite, Apt. #, etc.:
City & State: Renton, WA	City & State: Renton, WA
Zip: 98055-2983 Country: USA	Zip: 98057-9004 Country: USA

4. Date Incorporated or Qualified *To Do Business in Florida*: 04/20/1998

5. FEI Number: 91-0877012 ☐ 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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
CP	ALTMAN, E.A.	~~1016 E. PIKE ST.~~ 500 SW 7th Street, Suite A100	~~SEATTLE WA 98122~~ Renton, WA 98055-2983
ST	KREISS, DAVID	~~1016 E PIKE ST~~ 500 SW 7th Street, Suite A100	~~SEATTLE WA 98122~~ Renton, WA 98055-2983
D	GARRISON, KITCHEN	~~1016 E PIKE ST~~ 500 SW 7th Street, Suite A100	~~SEATTLE WA 98122~~ Renton, WA 98055-2983
D	Richard Cravey, Jr.	500 SW 7th Street, Suite A100	Renton, WA 98055-2983
D	Steven J. Hunter	500 SW 7th street, Suite A100	Renton, WA 98055-2983

8. Name and Address of Current Registered Agent

~~C T CORPORATION SYSTEM~~
~~1200 SOUTH PINE ISLAND ROAD~~
~~PLANTATION FL 33324~~

9. Name and Address of New Registered Agent

Name: Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street
Suite, Apt. #, Etc.:
City: Tallahassee State: FL Zip Code: 32301

CR2E040 (8/00)

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: SIGNATURE REQUIRED, AS. Tracy Hanna Date: 11/16/00
REGISTERED AGENT MUST SIGN

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 Steven J. Hunter 10/19/2000 (425) 643-3311
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Steven J. Hunter, Director

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