FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

07 FEB 23 AM 8:18

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT

05-07

CR2E081 (1/07)

DOCUMENT # F99000001431

1. Corporation Name
Boiler-Tek, Inc.

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
9700 Celeste Road	P.O. Box 720
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Saraland Al	City & State: Saraland Al
Zip: 36571 Country: U.S.	Zip: 36571 Country: U.S.

4. Date Incorporated or Qualified To Do Business In Florida: 3/16/1999

5. FEI Number: 63-1054480 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Name and Address of Current Registered Agent

Name: CT Corporation Systems
Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road
Suite, Apt. #, Etc.
City: Plantation State: FL Zip Code: 33324

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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: Jeffrey D. Butterfield Assistant Secretary
REGISTERED AGENT MUST SIGN
Date: 2/22/07

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	O.T. Moody	9700 Celeste Road	Saraland Al 36571

10. I certify that I am an officer or director of the resultant corporation authorized 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 contained in Chapter 119, 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: O.T. Moody 2/22/07 251-679-9544
SIGNATURE AND TYPED OR PRINTED NAME OF PRESIDING OFFICER OR DIRECTOR — Date — Daytime Phone #

FL010 - 1/1/01 CT System Online

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

BOILER-TEK, INC.

Certificate of Status	1
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