

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENTFLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F99000002606

1. Corporation Name

THE HILLMAN GROUP, INC.

Principal Place of Business

10590 HAMILTON AVE.  
CINCINNATI OH 45231

Mailing Address

10590 HAMILTON AVE.  
CINCINNATI OH 45231

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City &amp; State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City &amp; State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

05/20/1999

5. FEI Number

31-1623179

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
DS	CORVINO, JOSEPH M	10590 HAMILTON AVE.	CINCINNATI OH 45231
CEP	HILLMAN, MAX W	10590 HAMILTON AVE.	CINCINNATI OH 45231
P	HILLMAN, RICHARD P	10590 HAMILTON AVE.	CINCINNATI OH 45231
VPTC	DALE, CHARLES R	10590 HAMILTON AVE.	CINCINNATI OH 45231
AS	DABROWSKI, JOHN J	10590 HAMILTON AVE.	CINCINNATI OH 45231
SEE ATTACHED LIST OF OFFICERS & DIRECTORS			

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

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

Suite/Apt. #, Etc.

City

State

Zip Code

000004014920--5  
-04/18/01--01020--010  
\*\*\*\*900.00 \*\*\*\*900.00

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

Connie Bryan

CONNIE BRYAN  
SPECIAL ASSISTANT SECRETARY  
REGISTERED AGENT MUST SIGN

Date

4/4/01

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:

John P. Drummy

John P. Drummy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/01

Date

(215) 282-1290 26

Daytime Phone #

FILED

01 APR -6 PM 3:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT

00-02

202

Appendix to Florida  
Application for Reinstatement

**Directors and Officers of  
The Hillman Group, Inc.**

---

1. Max W. Hillman, CEO  
10590 Hamilton Avenue  
Cincinnati, OH 45231
2. Richard P. Hillman, President  
10590 Hamilton Avenue  
Cincinnati, OH 45231
3. James P. Waters, VP-Fin, CFO, Treasurer  
10590 Hamilton Avenue  
Cincinnati, OH 45231
4. Joseph M. Corvino, Director, Vice President and Secretary  
10590 Hamilton Avenue  
Cincinnati, OH 45231
5. John P. Drummy, Assistant Secretary  
10590 Hamilton Avenue  
Cincinnati, OH 45231