

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

03 APR 18 PM 3:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H41892

1. Corporation Name
Heyer-Metro Distributors, Inc.

2. Principal Office Address
1563 Hubbard Avenue

Suite, Apt. #, etc.

City & State
Batavia, Illinois

Zip Country
60510 USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip Country

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida February 8, 1995

5. FEI Number 59-2494442 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 Parkside Inc.

Street Address (P.O. Box Number is Not Acceptable)
2604-1 Tampa East Blvd.

Suite, Apt. #, Etc.

City State Zip Code
Tampa FL 33619

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 Ronald C. Heitzman VP/CFO Date 4-14-2003
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
Director	George A. Pattee	1563 Hubbard Avenue	Batavia, IL 60510
Director	Ronald C. Heitzman		
CEO President	George A. Pattee		
CFO, VP, Sec., Treas.	Ronald C. Heitzman		

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: Ronald C. Heitzman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-2003

Date

Daytime Phone #