

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

97 NOV 17 AM 11:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 581164

1. Corporation Name

Williams Capital Group, Inc.

Principal Place of Business

Mailing Address

777 E. Wisconsin Ave.
Milwaukee, WI 53202

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 Address, If Applicable

Attn: Glen F. Hackmann
Suite, Apt. #, etc. c/o Robert W. Baird
& Co., 777 E. Wisconsin Ave.
City & State Milwaukee, WI
Zip 53202 Country USA

Attn: Glen F. Hackmann
Suite, Apt. #, etc. c/o Robert W. Baird
& Co., 777 E. Wisconsin Ave.
City & State Milwaukee, WI
Zip 53202 Country USA

4. Date Incorporated or Qualified
To Do Business in Florida

7/6/87

5. FEI Number

59-2837467

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Director Pres.	Glen F. Hackmann	777 E. Wisconsin Avenue	Milwaukee, WI 53202
Director VP/Asst. Secy.	Thomas A. Tollette	410 E. Jackson St., Ste. 2900	Tampa, FL 33602
Director CFO/Treas.	James M. Zemlyak	777 E. Wisconsin Avenue	Milwaukee, WI 53202
Sec'y.	Deborah J. Fabritz	777 E. Wisconsin Avenue	Milwaukee, WI 53202

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****758.75 ****758.75

8. Name and Address of Current Registered Agent

F & L Corp.
The Greenleaf Building
200 Laura Street
Jacksonville, FL 32202-3527

9. Name and Address of New Registered Agent

Name CT Corporation System
Street Address (P.O. Box Number is Not Acceptable)
1200 S. Pine Island Road
Suite, Apt. #, Etc.

City Plantation State FL Zip Code 33324

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]
REGISTERED AGENT MUST SIGN

Date

11-7-97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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]

Glen F. Hackmann

(414) 365 2612