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03 OCT 27 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 OCT 27 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 96-03

DOCUMENT # M84150

1. Corporation Name

DiMucci Building Corporation of Florida, Inc.

2. Principal Office Address	3. Mailing Office Address
285 West Dundee Road	285 West Dundee Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Palatine, Illinois	City & State: Palatine, Illinois
Zip: 60074 Country: USA	Zip: 60074 Country: USA

4. Date Incorporated or Qualified To Do Business In Florida: 6/1/1988

5. FEI Number: 36-3585756 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $87.5 Additional Fee

7. Name and Address of Current 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

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: Laura D. Mudra Date: 10/24/03

REGISTERED AGENT MUST SIGN

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DPTS	Anthony P. DiMucci	285 West Dundee Road	Palatine, Illinois 60074

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: [signature] 10/24/03 847-491-4400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Florida Department of State
Division of Corporations
Public Access System

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To:
Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)521-1030

CORPORATION REINSTATEMENT

DIMUCCI BUILDING CORPORATION OF FLORIDA, INC.

Certificate of Status	0
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