PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 MAR 21 AM 7:20

DOCUMENT # N01000006446

1. Corporation Name

Construction Management Institute of Miami, Inc.

REINSTATEMENT

02-07

CR2E081 (1/07)

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
828 West Indiantown Road		828 West Indiantown Road	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite # 103		Suite # 103	
City & State		City & State	
Jupiter, Florida		Jupiter, Florida	
Zip	Country	Zip	Country
33458	Palm Beach	33458	Palm Beach

4. Date Incorporated or Qualified To Do Business In Florida: 09/06/2001

5. FEI Number: 02-0468628 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED [X] $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Arthur T. House Jr.

Street Address (P.O. Box Number is Not Acceptable): 5 Corrie Place

Suite, Apt. #, Etc.:

City	State	Zip Code
Boynton Beach	FL	33426

☐ 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 617.0603, F.S.

Signature of Registered Agent: Arthur T. House Jr. Registered Agent — REGISTERED AGENT MUST SIGN

Date: 3/15/07 March 15, 2007 561-744-0075

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
Exec. Director	Arthur T. House Jr.	5 Corrie Place	Boynton Beach, Florida 33458
Director	Mark L. House	5 Corrie Place	Boynton Beach, Florida 33458

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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.; 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.

Arthur T. House Jr. Executive Director — March 15, 2007 — 561-744-0075

SIGNATURE: _____ 3/15/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #