## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

|  |                                   |         |   |                     |  |       |  | •  |  |
|--|-----------------------------------|---------|---|---------------------|--|-------|--|--|--|
| CORPORATION REINSTATEMENT  |                                   |         | FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS |                     |  |       |  | FILED  08 AUG - 1 AM 8: 53                 |  |
| DOCUMENT # P03000040494  1. Corporation Name  TPG INTERNATIONAL,INC.   |                                   |         |   |                     |  |       |  | SECRETARY OF STAIL<br>FALLAHASSEE, FLORIDA |  |
| 2. Principal Office Address - No P.O. Box # 3. Mailing Office Address  |                                   |         |   |                     |  |       | REINSTATEMENT 05-08  |  |  |
| 801 INTERNATIONAL PARKWAY  |                                   |         |   | 801 INTE            | 801 INTERNATIONAL PARKWAY                      |       |  |  | CR2E081 (12/07)  |
| Suite, Apt. #, etc.  |                                   |         |   | Suite, Apt. #, etc. |  |       |  | -  |  |
| 5th FLOOR  |                                   |         |   |                     | 5th FLOOR                                      |       |  |  | porated or Qualified   |
| City & State   |                                   |         |   | City & State        |  |       |  | To Do Busi                                 | ness in Florida 04/07/2003   |
| LAKE MARY,FLORIDA  |                                   |         |   | LAKE MA             | LAKE MARY,FLORIDA                              |       |  | 5. FEI Number                              |  |
| Zip  |                                   | Country |   | Zíp                 |  | Count |  | 6.   | Not Applicable   |
| 32746  |                                   | us      |   | 32746               | ι  | JS    |  |  | OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status             |
| 7. Name and Address of Current Registered Agent  |                                   |         |   |                     |  |       |  |  |  |
| Name   |                                   |         |   |                     |  |       | ✓ The re   | instatement fee is imposed, except in      |  |
| TIMOTHY PURSER   |                                   |         |   |                     |  |       | 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. |  |  |
| Street Address (P.O. Box Number is Not Acceptable) 801 INTERNATIONAL PARKWAY   |                                   |         |   |                     |  |       |  |  |  |
| Suite, Apt. #, Etc.<br>5th FLOOR   |                                   |         |   |                     |  |       |  |  |  |
| City<br>LAKE MARY  |                                   |         |   |                     | State Zip Code 32746                           |       |  | 100 00                                     |  |
| 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 Limit Aur United States 1850   |                                   |         |   |                     |  |       |  |  |  |
| REGISTERED AGENT MUST SIGN 08/12/08/-00/0130/12 ***100.1   |                                   |         |   |                     |  |       |  |  |  |
| 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at leas  |                                   |         |   |                     |  |       |  | east 3 directors)                          |  |
| Titles   | Name of Officers and/or Directors |         |   | rs                  | Street Address of Eac<br>Officer and/or Direct |       |  |  | City / State / Zip   |
| CEO  | TIMOTHY PURSER                    |         |   |                     | 801 INTERNATIONAL PAR                          |       |  | RKWAY                                      | LAKE MARY,FL 32746   |
| CFO  | RICHARD PURSER                    |         |   |                     | 801 INTERNATIONAL PAR                          |       |  | RKWAY                                      | LAKE MARY,FL 32746   |
| TRES.  | BINNIE PURSER MARTINO             |         |   | 0                   | 801 INTERNATIONAL PAR                          |       |  | RKWAY                                      | LAKE MARY,FL 32746   |
|  |                                   |         |   |                     |  |       |  | 0871<br>                                   | 00134357890<br>2/0801013011 **500.00<br>0013 <del>4357090</del><br>2/0801013012 **100.00 |
| 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 filling 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. |                                   |         |   |                     |  |       |  |  |  |
| SIGNATURE: 08/1/2008   |                                   |         |   |                     |  |       |  |  |  |
| SIGNATURE: 100/1/2006 SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #  |                                   |         |   |                     |  |       |  |  |  |
|  |                                   |         | 1/  | <u></u>             |  |       |  |  |  |

DC 8/1