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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P040000159896

1. Corporation Name
MVI Technology, Inc.

2. Principal Office Address - No P.O. Box # 1155 Perimeter Center West Suite, Apt. #, etc. Suite 700 City & State Atlanta, GA Zip 30338		3. Mailing Office Address 1155 Perimeter Center West Suite, Apt. #, etc. Suite 700 City & State Atlanta, GA Zip 30338	
Country USA	Country USA	Country USA	Country USA

CR2B081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida
11/23/2004

5. FEI Number
55-0886822

6. CERTIFICATE OF STATUS DESIRED

Applied For
Not Applicable

\$6.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
Suite, Apt. #, Etc.

City
Plantation

State
FL

Zip Code
33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0503, F.S.

Signature of Registered Agent Connie Bryan Date 12/10/2012

REGISTERED AGENT Assistant Secretary

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
Pres	Vincent L. Burkett	401 Congress Ave. Ste 3100	Austin, TX 78701
Secr	Marc V. Teillon	150 California St, 19th Fl	San Francisco, CA 94111
Treas	James P. Hickey	180 N Stetson Ave, Ste 4000	Chicago, IL 60601
VP	Robert Harris	1155 Perimeter Center West, Ste 700	Atlanta, GA 30338
		DEC 11 2012	REINSTATEMENT
		T. SCOTT	

10. E-mail Address: Linda.Slagle@Aptean.com (To be used for future annual report notification)

11. 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. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 617.165, F.S.

SIGNATURE: Robert E. Harris, Jr. Date 12/10/12 Phone 678-259-8596

Florida Department of State
Division of Corporations
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**CORPORATION REINSTATEMENT
MVI TECHNOLOGY INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$750.00