Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6384

From:
Account Name : AGENTS AND CORPORATIONS, INC
Account Number : I20010000112
Phone : (302)575-0875
Fax Number : (302)575-1642

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

CORPORATION REINSTATEMENT
DIVERSIFIED MANAGEMENT SYSTEMS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
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CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

11 NOV -1 PM 4:29

DOCUMENT # P05000126387

1. Corporation Name
Diversified Management Systems, Inc.

REINSTATEMENT 10-11

CR2E081 (11/10)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
2755 Valwood Pkwy	2755 Valwood Pkwy
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Dallas, TX	City & State: Dallas, TX
Zip: 75234 Country: United States	Zip: 75234 Country: United States

4. Date Incorporated or Qualified To Do Business in Florida: 9/13/2005

5. FEI Number: 753263339 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Agents and Corporations, Inc.

Street Address (P.O. Box Number is Not Acceptable): 300 Fifth Avenue South

Suite, Apt. #, Etc: Suite 101-330

City: Naples State: FL Zip Code: 34102

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: Dawn D Williams Date: 11/1/2011
REGISTERED AGENT MUST SIGN

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
P	J D BROWN	108 Amory Dr.	Benbrook Tx 76126
V	W BRENT THOMPSON	2755 Valwwood Pkwy	Dallas, Tx. 75234
ST	BECKY THOMPSON	1150 Shady Oak Cr.	Argyle, Tx. 76226
D	MARCELLA BROWN	108 Amory Dr	Benbrook, Tx. 76126

10. E-mail Address: W8TDC@SWBELL.NET
(To be used for future annual report notification)

11. I certify that I am an officer or director of 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.817.155, F.S.

SIGNATURE: W Brent Thompson 11/1/2011 2144055188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

11/1 ad