

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 MAY 29 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P06537**

1. Corporation Name

International Components Corporation
doing business in Florida as International Components
Corporation of Illinois

2. Principal Office Address
420 N. May St.

Suite, Apt. #, etc.

City & State

Chicago, IL

Zip

60622

Country

USA

3. Mailing Office Address
420 N. May St.

Suite, Apt. #, etc.

City & State

Chicago, IL

Zip

60622

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

6/25/1985

5. FEI Number

36-2642978

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

LexisNexis Document Solutions, Inc.

Street Address (P.O. Box Number is Not Acceptable)

3953 W.W. Kelley Road

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32311

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

Henry Kuntz
REGISTERED AGENT MUST SIGN

Date

5-28-02

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
	See Attachment		

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven W. Foley, Vice President

Date

5/28/02 (312)

Daytime Phone #

CR2E081 (9/01)

**ATTACHMENT TO
CORPORATION REINSTATEMENT
OF
INTERNATIONAL COMPONENTS CORPORATION OF ILLINOIS**

Item 9:

<u>Titles</u>	<u>Name of Officers and/or Directors</u>	<u>Street Address</u>	<u>City/State/Zip</u>
P/CEO/D	James L. Gaza	420 N. May St.	Chicago, IL 60622
COO	Stephen M. McClure	420 N. May St.	Chicago, IL 60622
S/T/VP	Steven W. Foley	420 N. May St.	Chicago, IL 60622
Exec. VP	Stuart B. Oakes	420 N. May St.	Chicago, IL 60622
VP	Robert Wentink	420 N. May St.	Chicago, IL 60622
D	Robert Logan	1162 Wade St.	Highland Park, IL 60035
D	Michael Targoff	1100 Park Ave., Apt. 11C	New York, NY 10021
D	Thomas G. Mendell	911 Park Ave., #12B	New York, NY 10021
D	Eric Wilkinson	48 East 82nd St., Apt. #3W	New York, NY 10028

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005

REFERENCE: 2034793
(Sub Account)

DATE: 5/29

REQUESTOR NAME: Lexis Document Services

ADDRESS:

TELEPHONE: () () ext ()

CONTACT NAME:

CORPORATION NAME: P 06537

200005638262

DOCUMENT NUMBER:
(if applicable)

AUTHORIZATION:

Cynthia J. Woodward

*Reinstatement
File First*

- ☐ CERTIFIED COPY (1-9)
☐ CERTIFICATE OF STATUS (1-9)
☒ PLAIN STAMPED COPY

- | | | |
|---------------------|---------------------|----------------|
| () Call When Ready | () Call if Problem | () After 4:30 |
| () Walk In | () Will Wait | () Pick Up |
| () Mail Out | | |