

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P14000030771

1. Corporation Name

Technica Builders Inc.

2. Principal Office Address - No P.O. Box #

6574 N. State Road 7

Suite, Apt. #, etc

#154

City & State

Coconut Creek, FL

Zip

33073

Country

USA

3. Mailing Office Address

702 Magna Drive

Suite, Apt. #, etc

City & State

Round Lake, IL

Zip

60073

Country

USA

100319714421

CR2E081 (11/10)

4. Date Incorporated or Qualified  
To Do Business in Florida

04/04/2014

5. FET Number

46-5347124

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

Jeffrey D. Ellis

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

6574 N. State Road 7

Suite, Apt. #, Etc.

#154

City

Coconut Creek

State

FL

Zip Code

33073

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

REGISTERED AGENT MUST SIGN

Date 10/09/2018

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/D	Donald A. Hempson, JR.	702 Magna Drive	Round Lake, IL 60073
C/D	William V. Glastris, JR.	702 Magna Drive	Round Lake, IL 60073
V/D	Jeffrey D. Ellis	702 Magna Drive	Round Lake, IL 60073
V	Greg Gerdeman	702 Magna Drive	Round Lake, IL 60073
REINSTATEMENT			OCT 15 2018
			R. HUNT

10. E-mail Address: ggerdeman@unitedskys.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.817.155, F.S.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey Ellis Vice President +  
Director

Date 10/09/18

865.406.3307

Daytime Phone #

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 430487 8014728

AUTHORIZATION :

COST LIMIT : \$ 750.00

ORDER DATE : October 9, 2018

ORDER TIME : 2:51 PM

ORDER NO. : 430487-005

CUSTOMER NO: 8014728

RECEIVED STATE  
DEPARTMENT OF STATE  
18 OCT 15 AM 11:08

DOMESTIC FILINGS

NAME: TECHNICA BUILDERS INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft - Ext# 62925

EXAMINER'S INITIALS

OCT 15 2018

R. HUNT