

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 AUG 26 PM 12:04

**CORPORATION REINSTATEMENT**

**FLORIDA DEPARTMENT OF STATE**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P14288

1. Corporation Name

American Thermoplastic Extrusion Company

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

4881 NW 128th Street Road

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33054

Country

USA

3. Mailing Office Address

1802 N. Union Street

Suite, Apt. #, etc.

City & State

Fostoria, OH

Zip

44830

Country

USA

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 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*Diane Stout* Diane Stout, Asst. Secretary

REGISTERED AGENT MUST SIGN

Date 8-20-08

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Title | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip   |
|-------|--------------------------------------|---------------------------------------------------|----------------------|
| C     | Donald P. Miller                     | 1802 N. Union Street                              | Fostoria, OH 44830   |
| V/T   | Mark J. Baker                        | 1802 N. Union Street                              | Fostoria, OH 44830   |
| D     | Judy R. Miller                       | 1802 N. Union Street                              | Fostoria, OH 44830   |
| S     | Angela K. Gillett                    | 1802 N. Union Street                              | Fostoria, OH 44830   |
| D     | Donald J. Hand                       | 11807 North Pa Be Shan Trail                      | Charlevoix, MI 49720 |
| D     | Dan Sandman                          | 2173 Hycroft Drive                                | Pittsburgh, PA 15241 |

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 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:

*Mark J. Baker* TREAS

SIGNATURE AND TYPE OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

5/14/08

Date

419-436-4558

Daytime Phone #

REINSTATEMENT 06-08

B 8/27/08  
05/19/08 01034 004

CR2E081 (12/07)

1050.50

4. Date Incorporated or Qualified  
To Do Business in Florida May 4, 1987

5. FBI Number  
34-1519209

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

SEE INSTRUCTIONS ON REVERSE SIDE

☐ The reinstatement fee is imposed, except in 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.