

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED  
FILED

16 APR 18 AM 11:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT #** P16163

1. Corporation Name

INTERTEK INTL INC.

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

8600 N.W. 17th STREET

Suite, Apt. #, etc.

SUITE 100

City & State

MIAMI, FL

Zip

33126

Country

US

3. Mailing Office Address

8600 N.W. 17th STREET

Suite, Apt. #, etc.

SUITE 100

City & State

MIAMI, FL

Zip

33126

Country

US

CR2E081 (11/10)

4. Date Incorporated or Qualified  
To Do Business in Florida

09/29/1987

5. FEI Number

54-1301942

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

Corporation Service Company

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

1201 Hays St.

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

100284699881

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

*Courtney Williams*

Courtney Williams

Date

04.18.16

REGISTERED AGENT MUST SIGN

Asst. Vice President

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	Roxana Labiosa	8600 N.W. 17th STREET	MIAMI, FL 33126
VP	Darrell Hodsell	8600 N.W. 17th STREET	MIAMI, FL 33126
Treas	Bonnie Chan	3933 U.S. ROUTE 11	CORTLAND, NY 13045
S	Joseph Bonassar	3933 U.S. ROUTE 11	CORTLAND, NY 13045

S. HAWKES

10. E-mail Address: victoria.kron@intertek.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 on a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: Joseph Bonassar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/16

Date

607-758-6285

Daytime Phone #

EXAMINED

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

ACCOUNT NO. : I20000000195

REFERENCE : 105659 7400995

AUTHORIZATION :

COST LIMIT : \$ 1,200.00

ORDER DATE : April 15, 2016

ORDER TIME : 8:59 AM

ORDER NO. : 105659-005

CUSTOMER NO: 7400995

REINSTATEMENT

NAME: INTERTEK INTERNATIONAL INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender

EXAMINER'S INITIALS \_\_\_\_\_

RECEIVED  
DEPARTMENT OF  
16 APR 18 AM 11:21