

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

pg 1 of 2

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 97 FEB 21 PM 3:29 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT #127931 1. Corporation Name <i>Barefoot Grass Lawn Service, Inc</i>					
Principal Place of Business <i>450 W. Wilson Bridge Rd</i> <i>Worthington Oh 43085</i>		Mailing Address <i>Same</i>			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable Sute, Apt. #, etc. City & State Zip Country		3. New Mailing Address, If Applicable Sute, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida <i>01/30/90</i> 5. FEI Number <i>31-1265914</i> Applied For Not Applicable	
6. REINSTATEMENT <i>90-97</i>					
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip		
	<i>see list</i>		<i>200002096752--</i>	<i>5</i>	
			<i>-02/25/97--01083--001</i>		
			<i>****548.75 ****548.75</i>		
			<i>200002096752--</i>	<i>5</i>	
			<i>-02/25/97--01083--002</i>		
			<i>****375.00 ****375.00</i>		
8. Name and Address of Current Registered Agent <i>CT CORPORATION SYSTEM</i> <i>1200 S. PINE ISLAND ROAD</i> <i>PLANTATION FL 33324</i>			9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Sute, Apt. #, Etc. City State Zip Code <i>FL</i>		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent <i>Connie Bryan</i> <i>Connie Bryan, Special</i> Date <i>2-21-97</i> REGISTERED AGENT MUST SIGN <i>Assistant Secretary</i>					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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. 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: <i>W. H. R. Smith</i> <i>VP/Secy</i> Date <i>2-20-97</i> (614) 846-1800 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

BAREFOOT GRASS LAWN SERVICE, INC.
DIRECTORS

DONALD R. BRATTAIN
601 LAKESHORE PARKWAY
MINNEAPOLIS, MN 55305-5220

STAN GOLDER
576 ARBOR VITAE ROAD
WINNETKA IL 60093

WILLIAM R. GRIFFIN
4980 MIAMI ROAD
CINCINNATI, OH 45243

MARTY ERBAUGH
5122 DARROW ROAD
HUDSON, OH 44236

PATRICK J. NORTON - PRESIDENT
450 W. WILSON BRIDGE ROAD
WORTHINGTON, OH 43085

OFFICERS

MICHAEL R. GOODRICH
450 W. WILSON BRIDGE RD
WORTHINGTON OHIO 43085
SECRETARY & VICE PRESIDENT