

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

01 MAR 19 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P36707**

1. Corporation Name

AMERICOLD SERVICES CORPORATION

Principal Place of Business

Mailing Address

10 GLENLAKE PKWY
800
ATLANTA GA 30328
US

10 GLENLAKE PKWY
800
ATLANTA GA 30328
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

12/12/1991

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

93-0987431

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PCEO	MCNAMARA, DANIEL F.	ONE CONCOURSE PARKWAY, SUITE 450	ATLANTA GA 30328
VPC	SMITH, JOEL M. Please see list	ONE CONCOURSE PARKWAY, SUITE 450	ATLANTA GA 30328

000003892070--8
-03/22/01--01019--016
2900.00 *300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

SIGNATURE REQUIRED
JENNIFER F AULTMAN
ASSISTANT SECRETARY

REGISTERED AGENT MUST SIGN

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., 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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/00)

202

AMERICOLD SERVICES CORPORATION
LIST OF
OFFICER AND DIRECTORS
MARCH 22, 2001

<u>NAME</u>	<u>TITLE</u>
Daniel F. McNamara	President & Chief Executive Officer
Frederick B. Beilstein, III	Executive Vice President, Treasurer & Chief Financial Officer
Joseph Macnow	Vice President
Gary Hahn	Vice President, Controller & Assistant Secretary
Latonya Bryan	Secretary & Assistant Controller
Mary Rose	Assistant Secretary & Assistant Controller
Larry Portal	Assistant Secretary
Beth Chamblee	Assistant Secretary & Assistant Controller
Daniel F. McNamara	Director
Frederick B. Beilstein, III	Director

Address - 10 Glenlake Parkway
Suite 800
Atlanta, GA 30328

-Per John Motern on 3/22/01