

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P38013

1. Corporation Name

PRM REALTY CORPORATION

Principal Place of Business

875 NORTH MICHIGAN AVE
SUITE 1350
CHICAGO IL 60611

Mailing Address

875 NORTH MICHIGAN AVE
SUITE 1350
CHICAGO IL 60611

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/23/1992

5. FEI Number

36-3809138

Applied For

Not Applicable

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
PVST	MORRIS, PETER R.	875 NORTH MICHIGAN AVE SUITE 135	CHICAGO IL 60611
CD	MORRIS, PETER R.	875 NORTH MICHIGAN AVE SUITE 135	CHICAGO IL 60611
AS	RODGERS, LANCE	875 NORTH MICHIGAN AVE SUITE 135	CHICAGO IL 60611

000002052280-1
-01/09/97-01038-010
****678.75 ****678.75

REINSTATEMENT

8. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET

TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name

CORPORATION SERVICE COMPANY

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

Suite, Apt. #, Etc.

City

000002052280-1

01/09/97-01038-010

****236. FL ****236.25

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

Laura R. Dunlap

LAURA R.

Date

1/7/97

REGISTERED AGENT MUST SIGN

DUNLAP, AS AGENT

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 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)(f), 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:

REINSTATEMENT REQUIRED

1/3/97

312/587-9900