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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION  
REINSTATEMENT**



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

**FILED**

00 MAR 30 AM 10:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P38757**

1. Corporation Name

James Martin & Co., Inc.

2. Principal Office Address

3050 Chain Bridge Road

3. Mailing Office Address

3050 Chain Bridge Road

Suite, Apt. #, etc.

600

Suite, Apt. #, etc.

600

City & State

Fairfax, VA 22030

City & State

Fairfax, VA 22030

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

05-12-92

5. FEI Number

54-1253757

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

SH AS Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

The Prentice-Hall Corporation System Inc.

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State  
FL

Zip Code

32301

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

*William J. Russell*  
REGISTERED AGENT MUST SIGN

Date

3/22/00

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
Pres.	John Gorman	3050 Chain Bridge Rd/Ste 600	Fairfax, VA 22030
Pres	Nelson Blitz	3050 Chain Bridge Rd/Ste 600	Fairfax, VA 22030
Sec/ Treas	William J. Russell	3050 Chain Bridge Rd/Ste 600	Fairfax, VA 22030

**REINSTATEMENT 96-00 178**

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 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

*William J. Russell*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William J. Russell

Date

3/15/00

(703) 352-0900

Daytime Phone #

CR2E081 (9/99)

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Attachment



ACCOUNT NO. : 072100000032

REFERENCE : 633821 4322328

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 1358.75

ORDER DATE : March 22, 2000

ORDER TIME : 1:58 PM

ORDER NO. : 633821-030

800003191078--1

CUSTOMER NO: 4322328

CUSTOMER: Rita C. Daley, Paralegal  
ODIN FELDMAN & PITTLEMAN, P.C.  
ODIN FELDMAN & PITTLEMAN, P.C.  
9302 Lee Highway  
Suite 1100  
Fairfax, VA 22031

DOMESTIC FILING

NAME: JAMES MARTIN & CO., INC.

EFFECTIVE DATE:

XX CERTIFICATE OF REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIALS:

RECEIVED  
00 MAR 30 PM 4:40  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA