

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 MAR - 4 AM 10:15

DOCUMENT # P960000 10364

1. Corporation Name

Catadyne Corporation

REINSTATEMENT 02-04

2. Principal Office Address

17 Horner St.

Suite, Apt. #, etc.

City & State

Warrenton, VA

Zip

20186

Country

USA

3. Mailing Office Address

17 Horner St.

Suite, Apt. #, etc.

City & State

Warrenton, VA

Zip

20186

Country

USA

800029884518

03/04/04--01031--025 **493.75

**4. Date Incorporated or Qualified
To Do Business in Florida**

2/1/96

5. FEI Number

113071481

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

Florida Incorporating and Registered Agents, Inc.

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

122 West Hillcrest Street

Suite, Apt. #, Etc.

City

Altamonte Springs

State

FL

Zip Code

32714

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**

See Signature attached

Date

REGISTERED AGENT MUST SIGN

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
Director D	Joseph Meuse	17 Horner St.	Warrenton, VA 20186

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/27/04

Daytime Phone #

Feb 27 04 03:45p

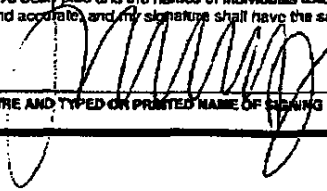
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P. 2

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2 of 2

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT #					
1. Corporation Name Catadyne Corporation					
2. Principal Office Address 17 Horner St.			3. Mailing Office Address 17 Horner St.		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Warrenton, WA			City & State Warrenton, WA		
Zip 20186	Country USA	Zip 20186	Country USA	4. Date Incorporated or Qualified To Do Business in Florida	
5. FEI Number				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 Florida Incorporating and Registered Agents, Inc.					
Street Address (P.O. Box Number is Not Acceptable) 122 West Hillcrest Street					
Suite, Apt. #, Etc.					
City Altamonte Springs				State FL	Zip Code 32714
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Signature of Registered Agent 				Date 2/27/04	
REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
Director	Joseph Meuse	17 Horner St.		Warrenton, WA 20186	
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SIGNATURE: 				Date 2/27/04	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	