PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION Katherine Harris FOR** Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 000093.560 DOCUMENT # 1. Corporation Name 99 SEP 27 PM 2: 168 SOIL-TECH, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 10 Robinwood Drive Longwood, FL If above addresses are incorrect in any way, line through incorrect information and enter correction below 2 New Principal Office Address If Applicable 10 Robinwood Drive 3 New Mailing Office Address, If Applicable Date Incorporated or Qualified
 To Do Business in Florida 10/30/97 Same Suite. Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State Applied for City & State Longwood, FL \$8.75 Additional Fee required Country Zip Country ^{Zip} 32779 CERTIFICATE OF STATUS DESIRED Seminole 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)

Name of Officers

Street Address of Each

10/05/89 - 01081 - 0

Officer and/or Directors i–-01081---007 Title(s) and/or Directors Officer and/or Director (Do NOT Use Post Office Box Numbers) ****900°00°*****900.00 Pres. James Wilder 10 Robinwood Drive Longwood, FL 32779 Sec. James Wilder 10 Robinwood Drive Longwood, FL 32779 James Wilder 10 Robinwood Drive Trea. Longwood, FL 32779 Dir. James Wilder 10 Robinwood Drive Longwood, FL 32779 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent William L. Mims, JR. Walter R. Moon
Street Address (P.O. Box Number is Not Acceptable) 320 N. Magnolia Ave. 200 North Primrose Drive Suite A-9 Orlando, FL 32801 Zip Code 32803 Orlando 10 I, being appointed the redistered agent of the above named corporation, an familiar with and accept the obligations of Section 607.0505, F.S Signature of Registered Agent Walter R. Moon REGISTERED AGENT MUST SIGN 11. This corporation owes the current year (See other side for information Yes D No 🖸 on intangible tax.) Intangible Personal Property Tax due June 30. 12. Learlify that Lam 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 filling 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. Date (407) 805-8900 SIGNATURE: CHARLES AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR