

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 JAN -7 AM 9:36

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000003966

1. Corporation Name

Holleran Consulting Group, Inc.

2. Principal Office Address - No P.O. Box #

801 N. Orange Ave

Suite, Apt. #, etc.

Ste 810

City & State

Orlando, FL

Zip

32801

Country

USA

3. Mailing Office Address

500 W. Madison St

Suite, Apt. #, etc.

Ste 2400

City & State

Chicago, IL

Zip

60661

Country

USA

7. Name and Address of Current Registered Agent

Name

CT Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

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

*[Signature]*

FLORENCE MERCERON

Date 1/6/09

REGISTERED AGENT MUST SIGN

ASSISTANT SECRETARY

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

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|--------------------|
| Pres   | John T. Cash, Jr.                    | 801 N. Orange Ave                                 | Orlando, FL 32801  |
| Sec    | John T. Cash, III                    | 801 N. Orange Ave                                 | Orlando, FL 32801  |
| Treas  | John T. Cash, Jr.                    | 801 N. Orange Ave                                 | Orlando, FL 32801  |
| V.P.   | Lori M. Lieser                       | 500 W. Madison St                                 | Chicago, IL 60661  |
| Dir    | John T. Cash, Jr.                    | 801 N. Orange Ave                                 | Orlando, FL 32801  |
| Dir    | John T. Cash, III                    | 801 N. Orange Ave                                 | Orlando, FL 32801  |

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 contained in Chapter 119, 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]*

Lori M. Lieser, VP

Date

1/6/09 312-9855100

Daytime Phone #

000139910470  
01/07/09--01051--008 \*\*900.00

REINSTATEMENT

07-08 KS

4. Date Incorporated or Qualified  
To Do Business in Florida

01/12/1998

5. FEI Number

59-3491019

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.