APPROVED AND FILED

99 DEC 29 PM 4:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

DOCUMENT # S21086

1. Corporation Name

Informed, Inc.

Principal Place of Business	Mailing Address
926 Great Pond Dr. STE. 2002 Altamonte Springs, Florida, 32714	20 E. Clementon Road STE. 1025 Gibbsboro, NJ 08026

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

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
5 Greentree Centre	5 Greentree Centre
Suite, Apt. #, etc. Suite 311	Suite, Apt. #, etc. Suite 311
City & State Marlton NJ 08053	City & State Marlton NJ
Zip 08053 Country USA	Zip 08053 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/24/90

5. FEI Number: 59-3049640 ☐ 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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D/P	David A. Cohen	5 Greentree Ctr, St 311	Marlton, NJ 08053
SVP/S	John M. Suender	5 Greentree Ctr., St 311	Marlton, NJ 08053

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***1350.00 ***1350.00

REINSTATEMENT 45-99

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
CT Corporation System 1200 S. Pine Island Road Plantation FL 33324	Name: John M. Suender Street Address (P.O. Box Number is Not Acceptable): 9700 S. Dixie Highway Suite, Apt. #, Etc.: Suite 610 City: Miami State: FL Zip Code: 33156

CR2E081 (12/98)

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: John M. Suender — REGISTERED AGENT MUST SIGN

Date: 12/28/99

11. This corporation owes the current year Intangible Personal Property Tax due June 30. 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)(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: John M. Suender — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John M. Suender, Sr. VP — Date

(800) 233-3030 — Daytime Phone #