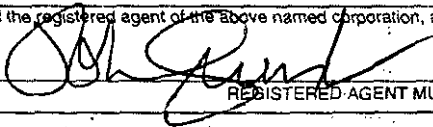
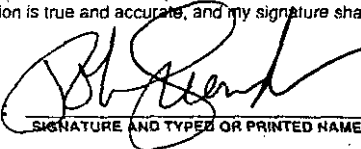


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

99 DEC 29 PM 4:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 926 Great Pond Dr. STE. 2002 Altamonte Springs, Florida, 32714		Mailing Address 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 5 Greentree Centre Suite Apt. #, etc. Suite 311 City & State Marlton NJ 08053 Zip 08053 Country USA		3. New Mailing Office Address, if Applicable 5 Greentree Centre Suite Apt. #, etc. Suite 311 City & State Marlton NJ Zip 08053 Country USA	
		4. Date Incorporated or Qualified To Do Business in Florida 12/24/90	
		5. FEI Number 59-3049640	
		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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
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
300003096963-5 -01/13/00--01007--020 ***1350.00 ***1350.00			
REINSTATEMENT 4599			
8. Name and Address of Current Registered Agent CT Corporation System 1200 S. Pine Island Road Plantation FL 33324		9. Name and Address of New Registered Agent 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	
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  Date 12/28/99 REGISTERED AGENT MUST SIGN			
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 re-instatement 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, Sr. VP (800) 233-3030 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	

CR2E081 (12/98)