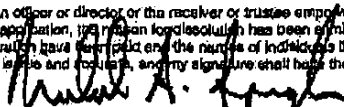


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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S88205					
1. Corporation Name UNITI, INC.					
2. Principal Office Address - No P.O. Box # 11005 MALAYSIA CIRCLE Suite, Apt. #, etc.			3. Mailing Office Address 11005 MALAYSIA CIRCLE Suite, Apt. #, etc.		
City & State BOYNTON BEACH, FL			City & State BOYNTON BEACH, FL		
Zip 33437	Country USA	Zip 33437	Country USA	4. Date Incorporated or Qualified To Do Business in Florida 10/22/1991	
				5. FEI Number 52-1965555	Applied For Not Applicable
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				6. CERTIFICATE OF STATUS DESIRED ☒ 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.					
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0605, F.S. Signature of Registered Agent  Anusha Pinsky Vice President and Assistant Secretary Date 11/10/08 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	
P/D	RICHARD A. SPIGLER	11005 MALAYSIA CIRCLE		BOYNTON BEACH, FL 33437	
VP/D S/T	JOANN E. DANA	1531 34TH STREET, NW		WASHINGTON, DC 20007	
REINSTATEMENT RH					
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 correct, and my signature shall have the same legal effect as if made under oath.  SIGNATURE: RICHARD A. SPIGLER, PRESIDENT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 11/7/2008 Daytime Phone # 202.232.5900					

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

UNITI, INC.

Certificate of Status	1
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