

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 SEP 19 PM 12:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # - V01547

1. Corporation Name

InTuition, Inc.

2. Principal Office Address

6420 Southpoint Pkwy.

3. Mailing Office Address

3015 South Parker Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 400

City & State

Jacksonville, FL 32216

City & State

Aurora, CO 80014

Zip

32216

Country

USA

Zip

80014

Country

USA

100023517641
10/02/03--01075--006 **900.00

REINSTATEMENT 02-03

4. Date Incorporated or Qualified To Do Business in Florida 12/20/1991

5. FEI Number
59-3103163

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Edward P. Martinez c/o Human Resources

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

6420 Southpoint Parkway

Suite, Apt. #, Etc.

City

Jacksonville,

State

FL

Zip Code

32216

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

Edward P. Martinez
REGISTERED AGENT MUST SIGN

Date

9/16/03

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Director Terry Heimes	121 South 13th Street #301	Lincoln, NE 68508
O	Officer Michael S. Dunlap	6801 South 27th Street	Lincoln, NE 68512
O	Officer Edward P. Martinez	6420 SouthPoint Pkwy.	Jacksonville, FL 32216

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 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:

Edward P. Martinez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/16/03

Daytime Phone #

(303) 696-5411

CR2E081 (10/02)