

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



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

FILED

01 MAR -7 AM 10:40

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # V11963

1. Corporation Name

PRO-TEAM PRODUCTS, INC.

2. Principal Office Address

2334 E. ROUTE 100, STE. 7B

Suite, Apt. #, etc.

SUITE 7B

City & State

PALM COAST, FLORIDA

Zip

32164

Country

U.S.A.

3. Mailing Office Address

POST OFFICE BOX 1555

Suite, Apt. #, etc.

City & State

FLAGLER BEACH, FLORIDA

Zip

32136

Country

U.S.A.

REINSTATEMENT-00

**4. Date Incorporated or Qualified
To Do Business in Florida**

FEBRUARY 6, 1992

5. FEI Number

650312411

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$875 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

FOREST HATCHER

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

2334 E. ROUTE 100

Suite, Apt. #, Etc.

SUITE 7B

City

PALM COAST

* Affidavit attached detailing
the name

800003828218

03709201-01056-010

State
FL

Zip
32164

***1890.00 ***1650.00

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]

REGISTERED AGENT MUST SIGN

Date 12-14-00

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
P/D	FOREST HATCHER	2334 E. ROUTE 100, STE. 7B	PALM COAST, FL 32164
VP/D	TRACY HATCHER	2334 E. ROUTE 100, STE. 7B	PALM COAST, FL 32164
S	TRACY HATCHER	2334 E. ROUTE 100, STE. 7B	PALM COAST, FL 32164
T	FOREST HATCHER	2334 E. ROUTE 100, STE. 7B	PALM COAST, FL 32164
AS	ANDREW J. NIEBLER	450 N. SUNNYSLOPE RD., STE. 270	BROOKFIELD, WI 53005

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:

[Signature]

FOREST A. HATCHER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-14-00

Date

(904) 437-3375

Daytime Phone #

CR2E081 (9/99)

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AFFIDAVIT OF CHARLES HELM


STATE OF FLORIDA)
) SS.
Flagler COUNTY)

Charles Helm, being first duly sworn on oath, deposes and states as follows:

1. I filed Articles of Incorporation for Pro-Team Products, Inc. (the "Corporation") in May, 1999. The Articles of Incorporation name myself as the only Board member of the first Board of Directors and the Incorporator.

2. The Corporation has been administratively dissolved by the Florida Secretary of State Office. I hereby, as the sole named Director and the Incorporator, terminate the Corporation's right to name protection effectively immediately.

Dated this 28th day of February, 2001 at Flagler County, Florida.



Charles Helm

Subscribed and sworn to before me
this 28th day of February, 2001.

Debbie Noble
Debbie Noble, Notary Public
State of Florida, County of Flagler



Debbie Noble
My Commission CC727536
Expires March 24, 2002