## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F04000007013

Entity Name: SCHIEFFELIN & CO.

FILED Oct 06, 2005 Secretary of State

TWO PARK AVENUE NEW YORK, NY 10016

Current Mailing Address: New Mailing Address:

TWO PARK AVENUE
NEW YORK, NY 10016

TWO PARK AVENUE
17TH FL.
NEW YORK, NY 10016

FEI Number: 13-5371790 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL T. KELLY

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: INGRAM, BRUCE G Name: ESPOSITO, JOHN P

 Address:
 19 EAST 57TH STREET
 Address:
 TWO PARK AVENUE - 17TH FL.

 City-St-Zip:
 NEW YORK, NY 10022
 City-St-Zip:
 NEW YORK, NY 10016

Title: V ( ) Delete Title: D (X) Change ( ) Addition Name: FOLKMAN, MICHAEL T Name: INGRAM, BRUCE G

Address: 19 EAST 57TH STREET Address: 19 EAST 57TH STREET - 5TH FL.

City-St-Zip: NEW YORK, NY 10022 City-St-Zip: NEW YORK, NY 10022

Title: S ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 FIRESTONE, LOUISE
 Name:
 KELLY, MICHAEL T

 Address:
 19 EAST 57TH STREET
 Address:
 TWO PARK AVENUE - 5TH FL.

 City-St-Zip:
 NEW YORK, NY 10022
 City-St-Zip:
 NEW YORK, NY 10016

( ) Delete Title: Title: (X) Change ( ) Addition CAMPBELL, COLIN DOMENJOZ, PIERRE JACQUES Name: Name: Address: 21-22, RUE BALZAC - BP 184 Address: TWO PARK AVENUE - 17TH FL. City-St-Zip: City-St-Zip: 75363 PARIS, FRANCE, NEW YORK, NY 10016

Title: D (X) Delete Title: ( ) Change ( ) Addition Name: HOUEL, PATRICK Name: Address: 22 AVENUE MONTAIGNE Address: City-St-Zip: 75008 PARIS, FRANCE, City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL T. KELLY EVP 10/06/2005