M0200000139 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS PORM. ED

LIMITED LIABILITY
COMPANY
REINSTATEMENT



COMPANY				:	Secretar	y of State orporations		06 SEP 22 AM 9: 12
DOCUMENT # M02000000139 1. Limited Liability Company's Name AES Ocean Express LLC					BK		SECRETARY OF STATE TALLAHASSEE. FLORIDA	
						() 6		CR2E041 (8/05)
, i	al Office Addre				Office Address			CIVECAT (0/00)
. 4300 W Suite, Apt. :	Vilson Bou	levard		4300 Wil: Suite, Apt. #,	son Boulevard		4. State/Cour	ntry of Formation Delaware
Guile, / pt.	4, 010.			Conta, Apr. #	CIG.			nized or Qualified
City & State	9			City & State			6. FEI Numbe	Iness in Florida January 15, 2002
	ton, VA			Arlington	lington			Applied For Not Applicable
Zip 22203		Country	•	Zip VA		Country USA	7. CERTIFICATE	OF STATUS DESIRED X \$5.00 Additional Fee required
22203		USA				ddress of Current Register		for a Certificate of Status
	Name		ND ATTION OF			 	ed Agent	
			DRATION SE		MPAN 1	(
	4		. Box Number is No AYS STREET				A	10.10
	Suite, Apt.	#, Etc.		fc*	الحالي	CT ATTERUE	INT Z	.006
	City TAL	LAHA	SSEE	1		O BRATTERAGE		State Zip Code FL 32301
9. 1, being appointed the registered agent of the above named limited liability company, am familiar with and acceptable manual properties of Chapter 808, F.S. Signature of Registered Agent Page 1								
10. Name	es and Street	Addresse	s of Managing Mem	bers/Managers				
Titles		Managing	Name of Members/Manage	rs	Street Address of Each Managing Member/Manager		jer	City / State / Zip
Pres	Aaron Sa	mson			4300 Wilson Boulevard			Arlington, VA 22203
VP	Scott Taylor				4300 Wilson Boulevard			Arlington, VA 22203
VP	Edward Cahill				4300 Wilson Boulevard			Arlington, VA 22203
Tres.	Willard C. Hoagland, III				4300 Wilson Boulevard			Arlington, VA 22203
Sec	Tham Nguyen				4300 Wilson Boulevard			Arlington, VA 22203
Asst. S	Leith Mann				4300 Wilson Boulevard			Arlington, VA 22203
filing the	his reinstateme	int applica limited lial	ation the reason for	dissolution has	been elimina	ated, the limited liability compa	any name satisfie	of for in chapter 608, F.S. I further certify that when s the requirements of section 608.406, F.S., and that te, and my signature shall have the same legal effect
Signature o Managing N	of Member/Mana	$_{\text{ger}}$	auch	ran	·	Date 9/21/0	06 c	703-522-1315
Tunad or on	de same hatel	eionina 1	(2020ina Mambar/I	Learner Le	eith Mann	, Assistant Secretary		

Signature of Managing Member/Manager _	Level han	Date 9/21/06	Daytime Phone # 703-522-1315
Typed or printed name of signi	ng Managing Member/Manager Lei	n Mann, Assistant Secretary	

102000000139

ACCOUNT	NO.	:

072100000032

REFERENCE: 471624

4321945

AUTHORIZATION

ORDER DATE: September 21, 2006

ORDER TIME : 2:30 PM

ORDER NO. : 471624-005

CUSTOMER NO: 4321945

REINSTATEMENT

NAME: AES OCEAN EXPRESS LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea

EXAMINER'S INITIALS