2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P10227

FILED Oct 16, 2006 Secretary of State

Entity Name: BCC FQUIPMENT LEASING CORPORATION

Current P	rincipal Pla	ce of Business:	New Principal Place	of Business:
	ES SW 3RD WA 98055	FLOOR US		
Current Mailing Address:		ess:	New Mailing Address:	
100 N RIVE MC: 5003-4 CHICAGO;		US		
El Number:	95-2801432	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
ΓALLAHAS	S STREET SSEE, FL 32	2301 US		
The above n the State	SSEE, FL 32	y submits this statement for the	e purpose of changing its registere	d office or registered agent, or both,
Γhe above n the State	named entite of Florida. RE: LAURA	y submits this statement for the		d office or registered agent, or both, Date
The above n the State SIGNATUF	named entit e of Florida. RE: LAURA Electro	y submits this statement for the		
The above n the State BIGNATUF	named entit e of Florida. RE: LAURA Electro	y submits this statement for the R DUNLAP onic Signature of Registered A ing Trust Fund Contribution ().	gent	
The above in the State GIGNATUF	named entitie of Florida. RE: LAURA Electro Inpaign Finance B AND DIRE PD SKOWRONS	y submits this statement for the R DUNLAP onic Signature of Registered A ing Trust Fund Contribution (). CTORS: () Delete KI, WALTER E SW 3RD FLOOR	gent	Date
The above in the State SIGNATUR SIECTION Can DFFICERS Title: Jame:	named entitie of Florida. RE: LAURA Electro mpaign Finance S AND DIRE PD SKOWRONS 500 NACHES RENTON, WA	y submits this statement for the R DUNLAP onic Signature of Registered A ing Trust Fund Contribution (). CTORS: () Delete KI, WALTER E S SW 3RD FLOOR A 98055 () Delete STEVEN W. (AIRPORT WAY, STE 750	gent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GARY GEIKEN AS 10/16/2006