PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
00 AUG 24 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F98000006704

1. Corporation Name

2 State Street Development, Inc.

200003384662--5
-09/07/00--01005--012
****908.75 ****908.75

REINSTATEMENT 99-00

2. Principal Office Address	**3.** Mailing Office Address
2 State St., [illegible]	2 State St., [illegible]
Suite, Apt. #, etc.: Suite 1400	Suite, Apt. #, etc.: Suite 1400
City & State: Rochester, NY [illegible]	City & State: Rochester, NY [illegible]
Zip: 14614 Country:	Zip: 14614 Country: US

4. Date Incorporated or Qualified To Do Business in Florida: 12/9/98

5. FEI Number: 16-1279520 ☐ 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 — acc

Name: UCC Filing & Search Services, Inc.

Street Address (P.O. Box Number is Not Acceptable): 526 East Park Avenue

Suite, Apt. #, Etc.: [illegible]

City: Tallahassee State: FL Zip Code: 32301-3551

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: Ed Hand, President Date: 8/24/00
REGISTERED AGENT MUST SIGN

CR2E081 (9/99)

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
PCD	Richard S. Brovitz	2 State St., Suite 1400	Rochester, NY 14614
VCD	David M. Flaum	3365 Elmwood Ave	Rochester, NY 14610
SD	Philip F. Spahn, Jr.	14 Buckingham St.	Rochester, NY 14607
TD	Norman M. Spindelman	3024 East Ave.	Rochester, NY 14610

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] Richard S. Brovitz, President Date: (716) 232-1660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #