PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JAN 30 PM 4:50

DOCUMENT # P98000005406

1. Corporation Name

Maddlee, Inc.

REINSTATEMENT 01-02

2. Principal Office Address	**3.** Mailing Office Address
500 W. Monroe St.	500 W. Monroe St.
Suite, Apt. #, etc.: 30th Floor	Suite, Apt. #, etc.: 30th Floor
City & State: Chicago, IL	City & State: Chicago, IL
Zip: 60661 Country: USA	Zip: 60661 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 1/20/98

5. FEI Number: 59-3486842 ☐ 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

500004883285--6
-02/06/02--01049--015
****900.00 ****900.00

Name: Mr. Philip V. Martino

Street Address (P.O. Box Number is Not Acceptable): Piper Marbury Rudnick & Wolfe LLP

Suite, Apt. #, Etc.: 101 E. Kennedy Blvd., Suite 2000

City: Tampa | State: FL | Zip Code: 33602

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: Philip V. Martino — Date: 10 Jan 02

REGISTERED AGENT MUST SIGN

CR2E081 (9/00)

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
D/S/CEO	Constantine Lallas	500 W. Monroe St., 30th Floor	Chicago, IL 60661
D/T/CEO	Robert Naso	8 Campus Drive	Parsippany, NJ 07054
D	Adrianne M. Horne	1209 Orange St.	Wilmington, DE 19801

$2/4

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: C. Lallas — 1/17/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #