

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. DOCUMENT # M00000000119

Name and Mailing Address

0008305 01 FP 0.352 **PRSRT T5 0 0615 77057-145225



CROWN CASTLE GT COMPANY LLC
510 BERING DRIVE, SUITE 500
HOUSTON TX 77057-1452

FILED

02 OCT 24 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500008698885
10/30/02--01065--003 **5.00



10/4/02

2. New Mailing Address 510 BERING DRIVE, SUITE 500 City, State, Zip HOUSTON, TX 77057- ATTN: Michelle Morton		4. State/Country of Formation DE	
Principal Place of Business 510 BERING DRIVE, SUITE 500 HOUSTON TX 77057		5. Date Organized or Qualified To Do Business in Florida 01/20/2000	
3. New Principal Place of Business Address City, State, Zip		6. FEI Number 76-0627250 Applied For Not Applicable	
8. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	
9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
10. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S. Signature of Registered Agent <i>Jennifer J. McBurnett</i> Jennifer J. McBurnett Assistant Secretary Date 10-23-02 REGISTERED AGENT MUST SIGN			
11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
P	JACKS, BRIAN Edward W. Waitender	1200 MACARTHUR BLVD., SUITE 200 200 Corporate DR	MAHWAH NJ 07430 Canonsburg PA 15317
SVP	MORELAND, BENJAMIN W	510 BERING DR., SUITE 500	HOUSTON TX 77057
EVP	HAWK, BLAKE E	510 BERING DR., SUITE 500	500008698885 10/30/02--01065--004 **150.00
EVP	KELLY, JOHN P	875 SOUTHPOINTE BLVD. 2000 Corporate Drive	CANONSBURG PA 15317
REINSTATEMENT 2002 DK			

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. 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 of Managing Member/Manager

[Signature]

Date

10/22/02

Daytime Phone #

7135703105

Typed or printed name of signing Managing Member/Manager