FILED
05 APR 28 PM 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 02.05

DOCUMENT # F00000002234

1. Corporation Name
USI Consulting Group, Inc.

2. Principal Office Address	3. Mailing Office Address
95 Glastonbury Blvd.	
Suite, Apt #, etc	Suite, Apt #, etc
City & State: Glastonbury, CT	City & State
Zip: 06033 — Country: U.S.A.	Zip — Country

4. Date Incorporated or Qualified To Do Business in Florida: 04/17/00

5. FEI Number: 061053228 ☐ 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

Name: CT Corporation System
Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road
Suite, Apt #, Etc
City: Plantation State: FL Zip Code: 33324

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: Connie Bryan — CONNIE BRYAN SPECIAL ASSISTANT SECRETARY Date: 4/19/2005
REGISTERED AGENT MUST SIGN

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
P	Doug Rubinstein	95 Glastonbury Blvd.	Glastonbury, CT 06033
SD	Ernest J. Newborn, II	555 Pleasantville Road - 160S	Briarcliff Manor, NY 10510
Asst. S	Namee Oberst	555 Pleasantville Road - 160S	Briarcliff Manor, NY 10510
T	Robert Schneider	555 Pleasantville Road - 160S	Briarcliff Manor, NY 10510

10. I certify that I am an officer or director of 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: Namee Oberst 4/8/05 (914) 749-8560
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E001 (03/05)

FL010 - 03/02/2005 C T System Online

C. Roberts APR 28 2005

Florida Department of State

Division of Corporations

Public Access System

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Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
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CORPORATION REINSTATEMENT

USI CONSULTING GROUP, INC.

Certificate of Status	0
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