PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE CORPORATION 04 NOV 18 PM 12: 10 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS SECRETARY OF STATE TAULAHASSEEL FLORIDA DOCUMENT # 543799 1. Corporation Name Sunstates ReaLTY GROUP, INC. 2. Principal Office Address 3. Mailing Office Address 150 N. WACKer Drive 150 N. WACKER DRIVE 17-64 Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & Stat 5. FEI Number Applied For hicago. 1cago. 591766299 Not Applicable \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED 60 for a Certificate of Status 7. Name and Address of Current Registered Agent Name Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street Suite, Apt. #, Etc. City Zip Code State 32301 FL Tallahassee 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. CR2E061 (01 pany Corpolation ervel com Signature of Date 11/16/2004 Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip LINCOLNWOOD IL 60712 CLYDE WM Engle INCOLNWOOD IL 60112 Ameria Fitzgerald 5 4433 W. 40004286734410, 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 filling 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. 2800 104 Pres. SIGNATURE TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

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CORPORATION SERVICE COMPANY

ACCOUNT NO.	: 07210000032
REFERENCE	: 978688 (7171429)
AUTHORIZATION	:
COST LIMIT	: \$ 900.00
ORDER DATE : November 17, 2004	4
ORDER TIME : 10:11 AM	
ORDER NO. : 978688-005	
CUSTOMER NO: 7171429	
CUSTOMER: Mr. Howard Friedman Bronson & Kahn Suite 1400 150 North Wacker Dr Chicago, IL 60606	
DOMESTIC F	TILINGS OF NOV
NAME: SUNSTATES REAL	LTY GROUP, INC.
XX REINSTATEMENT	

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX\_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Justin Cheshire 2909 EXAMINER'S INITIALS