2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F00000002553

Entity Name: SOLETANCHE, INC.

FILED Nov 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12 MCCLANE STREET CUDDY, PA 15031 **Current Mailing Address: New Mailing Address:** 12 MCCLANE STREET CUDDY, PA 15031 FEI Number: 13-1954492 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DR. SUITE 4 WESTON, FL 33331 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: ABBY DENNIS Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: PRFS (X) Change () Addition TARRALLE, BERNARD LEFEBVRE, LAURENT Name: Name: 401 EAST JEFFERSON, SUITE 203 12 MCCLANE STREET Address: Address: City-St-Zip: ROCKVILLE, MD 20850 City-St-Zip: CUDDY, PA 15031 Title: Title: ST () Delete () Change () Addition Name: AMALVY, MARC Name: 6 RUE DE WATFORD Address: Address: NANTERRE, FRANCE 92000, City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition BOCQUENTIN, MICHELE Name: Name: 6 RUE DE WATFORD Address: Address: City-St-Zip: NANTERRE, FRANCE 92000, City-St-Zip: Title: VAST () Delete Title: SECR (X) Change () Addition HOURNBUCKLE, LEWIS BEGGS, THOMAS W Name: Name: Address: 7205 CORPORATE CENTER DR, STE 503 Address: 12 MCCLANE STREET City-St-Zip: City-St-Zip: MIAMI, FL 33126 CUDDY, PA 15031 Title: CEO Title: () Delete () Change () Addition Name: LEFEBVRE, LAURENT Name: 7205 CORPORATE CENTER DR, STE 503 Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS W. BEGGS. SECR 11/20/2009