


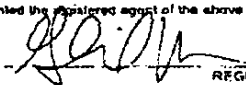

To: The Florida Dept. of State
Subject: 000173.81921

From: Ashley Smith

Monday, February 18, 2008 11:32 AM Page: 2 of 3

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F01000003839			
1. Corporation Name Clariant, Inc.			
2. Principal Office Address - No P.O. Box # 31 Columbia Suite, Apt. #, etc. City & State Aliso Viejo, CA Zip 92656 Country USA		3. Mailing Office Address 31 Columbia Suite, Apt. #, etc. City & State Aliso Viejo, CA Zip 92656 Country USA	
4. Date incorporated or Qualified To Do Business in Florida 7/19/2001			
5. FEI Number 75-2649072		Asper For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> 6075. Additional fee required for a Certificate of Status			
<input type="checkbox"/> The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.			
7. Name and Address of Current Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 2731 EXECUTIVE PARK DRIVE Suite, Apt. #, Etc. SUITE 4 City WESTON State FL Zip Code 33331			
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  Gabriel Hughes, Assistant Secretary Date 2/15/2008 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
	See Attached Rider		
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 contained in Chapter 119, 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:  Tony V. Aguilera SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 2/15/08 Daytime Phone # 944-425-8881			

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RIDER

CLARIENT, INC.

**OFFICERS AND DIRECTORS
December 31, 2006**

OFFICERS

<u>Name</u>	<u>Title</u>
James A. Datin	Chairman of the Board
Ronald A. Andrews	President and Chief Executive Officer
James V. Agnello	Sr. Vice President and Chief Financial Officer
Kenneth Bloom, M.D.	Chief medical Director
Heather Czeran	Executive Vice President and Chief Operating Officer
David J. Daly	Sr. Vice President of Commercial Operations
Karen K. Garza	Vice President of National Account and Strategic Initiatives
Jose de la Torre-Bueno, Ph.D.	Chief Technology Officer

DIRECTORS

Peter J. Boni
Steven J. Feder
Irwin Scher, M.D.
Frank P. Slaterry, Jr.
Dennis M. Smith, Jr.
Gregory Waller
Jon R. Wampler

ADDRESS

The address for each of the above individuals is c/o Clariant, Inc., 31 Columbia, Aliso Viejo, Ca 92656

TERM OF OFFICE

Each officer serves until the next annual meeting of stockholders in June, 2007 or until his or her earlier resignation.

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Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

000173.81921

CORPORATION REINSTATEMENT

CLARIENT, INC.

Certificate of Status	0
Certified Copy	0
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\$1,058.75

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