


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 07 JUL -5 PM 12: 42 SECRETARY OF STATE TALLAHASSEE, FLORIDA <i>TS. 7/5/07</i> REINSTATEMENT 03-07 CR2E081 (1/07)	
DOCUMENT # F02000001959				
1. Corporation Name Epipeline Inc.				
2. Principal Office Address - No P.O. Box # 580 Herndon Parkway		3. Mailing Office Address 580 Herndon Parkway		
Suite, Apt. #, etc. Suite 300		Suite, Apt. #, etc. Suite 300		
City & State Herndon, VA		City & State Herndon, VA		
Zip 20170	Country USA	Zip 20170	Country USA	
7. Name and Address of Current Registered Agent		4. Date Incorporated or Qualified To Do Business in Florida 4/16/02		
Name NRAI Services, Inc.		5. FEI Number 58-2476895		
Street Address (P.O. Box Number is Not Acceptable) 2731 Executive Park Drive		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		
Suite, Apt. #, Etc. Suite 4		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status		
City Weston		State FL		
Zip Code 33331		<input checked="" 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. 701106265407 07/17/07--01023--021 **750.00		
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 <i>Mary Perkins</i>		Date <i>July 3, 2007</i>		
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	
D/P/T	Timothy M. Walsh	580 Herndon Pkwy, Ste. 300	Herndon, VA 20170	
S	Carolyn Beck	580 Herndon Pkwy, Ste. 300	Herndon, VA 20170	
D	Ravi Ugale	580 Herndon Pkwy, Ste. 300	Herndon, VA 20170	
D	Marshall Griffin	580 Herndon Pkwy, Ste. 300	Herndon, VA 20170	
D	Rene Eichenberger	580 Herndon Pkwy, Ste. 300	Herndon, VA 20170	
D	Mark Patten	580 Herndon Pkwy, Ste. 300	Herndon, VA 20170	
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: <i>[Signature]</i>		Date <i>7-2-2007</i>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone # <i>781-929-7657</i>		