

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000016352 3))



H090000163523ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

RE-SUBMIT

please retain original filing
date of submission 1/23/09

CORPORATION REINSTATEMENT

JPMORGAN CHASE & CO.

Certificate of Status	1
Certified Copy	0
Page Count	023
Estimated Charge	\$908.75

Electronic Filing Menu

Corporate Filing Menu

Help

15/10/2

FILED

09 JAN 23 PM 4:51

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

DOCUMENT # FO2000006289

1. Corporation Name
JP MORGAN CHASE & CO.

2. Principal Office Address - No P.O. Box #
270 Park Avenue

3. Mailing Office Address
4 Chase Metrotech Center

Suite, Apt. #, etc.
NY 10017

City & State
New York, NY

City & State
Brooklyn, NY

Zip
10021

Country
USA

Zip
11246

Country
USA

7. Name and Address of Current Registered Agent

Name
CT Corporation

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

Suite, Apt. #, Etc.

City
Plantation

State
FL

Zip Code
33324

4. Date Incorporated or Qualified To Do Business in Florida
December 18, 2002

5. FEI Number
13-2624428

Applied For
 Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$575 Annual Fee required for a Certificate of Status

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.

8. I, being appointed the registered agent of the above corporation, do hereby accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: Chris McNeel
Chris McNeel
Assistant Secretary

Date: 1/23/09

9. Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	James Dimon - Director	270 Park Avenue	New York, NY 10017
	Crandall C. Bowles - Director	270 Park Avenue	New York, NY 10017
	Stephen B. Burke - Director	270 Park Avenue	New York, NY 10017
	James S. Crown - Director	270 Park Avenue	New York, NY 10017
	Christine N. Bannerman - Asst Sec.	4 Chase Metrotech Center	Brooklyn, NY 11246
	William C. Wedon - Director	270 Park Avenue	New York, NY 10017

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 118, 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: Christine N. Bannerman **Christine N. Bannerman/Asst Secretary** **January 22, 2009** **718.242.2522**

SIGNATURE AND TYPED OR PRINTED NAME OF GOING OFFICER OR DIRECTOR Date Daytime Phone #

REINSTATEMENT 08-09

CR2E081 (12/08)

1/23/09