	PLEAS	SE READ A	ALL INSȚRUCTI	ONS BEFO	ORE C	OMPLET	NG THIS FORM	D	
CORPORATION FLORIDA REINSTATEMENT				DEPARTMENT OF STATE Secretary of State ISION OF CORPORATIONS			2007 OCT 23 AM 8: 22 SECRETARY OF STATE TALLAHASSEE, FLORIDA		
DOCUMENT # F04000002880 1. Corporation Name VML, Inc.							TALLAHASSÉE, F	LORIDA	
	I Office Address - No P. Ichards Rd	3. Mailing Office Addres 911 Main St.	Main St. Shurin			CR2E081 (1/07)			
Suite 255			Suite, Apt. #, etc. Suite 2000 City & State			4. Date Incorporated or Qualified To Do Business in Florida			
Kansas City, MO			Kansas City, MO			5. FEI Number Applied For Not Applied be A Not Applied For Not			
Zip 64116	Country	USA	^{Zip} 64105	Country USA		6.	S8.75	Additional Fee requires a Certificate of Status	
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						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 Signature o Registered	500	attac			cept the ob	oligations of secti	on 607.0505 or 617.0503, F.S.	T 05.0	
9. Names	and Street Addresses o	f Each Officer and	/or Director (Florida nonpro	fit corporations mu	st list at lea	ast 3 directors)	·		
Titles		Name of and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip		
Pres.	1			250 Richards Rd. Ste 25			Kansas City, MO	64116	
Treas Jim Bellinghausen			250 I	250 Richards Rd. Ste			Kansas City, MO	64116	
	Matt Anthony			250 Richards Rd. Ste.2			Kansas City, MO	64116	
Dir.	Dir. John Zweig			125 Park Ave.			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 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.

125 Park Ave.

SIGNATURE: \

Mary Ellen Howe

Dir.

AMES J BELLINGHAUSEN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

New York, NY

816-218-6032 Daytime Phone #

10017

7026 02 **450.00

ACCEPTANCE OF APPOINTMENT

RE: VML, Inc.

Pursuant to Section 607.1503, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions in the state Florida.

Dated: October 8, 2007

C T CORPORATION SYSTEM

John J. Lingibar And Vice Provident