2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000001223

Entity Name: CAMP SYSTEMS INTERNATIONAL INC.

FILED Mar 28, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
999 MARCONI AVENUE TONKONKOMA, NY 11779				999 MARCONI AVENUE RONKONKOMA, NY 11779		
Current Mailing Address:			New Mailing Address:			
C/O WARBURG PINCUS LLC 466 LEXINGTON AVE. NEW YORK, NY 10017				999 MARCONI AVENUE RONKONKOMA, NY 11779		
FEI Number:	02-0736525	FEI Number Applied For ()	FEI Num	nber Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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: POLLY JANISSE						
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().						
OFFICERS	AND DIRECT	UKS:		ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () E GRAY, KENNETH 999 MARCONI AN TONKONKOMA, N	/ENUE		Title: Name: Address: City-St-Zip:	PRES (X) Change () Addition GRAY, KENNETH 999 MARCONI AVENUE RONKONKOMA, NY 11779	
Title: Name: Address: City-St-Zip:	STD () D DIETZE, EDWAR 999 MARCONI AV TONKONKOMA, N	/ENUE		Title: Name: Address: City-St-Zip:	CFO (X) Change () Addition DIETZE, EDWARD 999 MARCONI AVENUE RONKONKOMA, NY 11779	
Title: Name: Address: City-St-Zip:	CD () E COLODNY, MARI 466 LEXINGTON NEW YORK, NY	AVE.		Title: Name: Address: City-St-Zip:	D (X) Change () Addition COLODNY, MARK 466 LEXINGTON AVE. NEW YORK, NY 10017	
Title: Name: Address: City-St-Zip:	D () C GRAFF, MICHAEI 466 LEXINGTON NEW YORK, NY	AVE.		Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	D () C SADRIAN, JUSTII 466 LEXINGTON NEW YORK, NY	AVE.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COO () E GOTTEMUKKALA 999 MARCONI AN TONKONKOMA, N	/ENUE		Title: Name: Address: City-St-Zip:	EVP (X) Change () Addition GOTTEMUKKALA, VIBBY 999 MARCONI AVENUE RONKONKOMA, NY 11779	

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD DIETZE CFO 03/28/2007