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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2008 FEB 22 PM 2:51


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200119939442
03/11/08--01012--026 **300.00

REINSTATEMENT
CR2E08 (1/07)

D7-0 J

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F05000001649

1. Corporation Name

Totalmove Real Estate, Inc.

2. Principal Office Address - No P.O. Box #

One Greenwich Place

3. Mailing Office Address

One Greenwich Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Shelton, CT

City & State

Shelton, CT

Zip

06484

Country

USA

Zip

06484

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

3/16/05

5. FEI Number

421660549

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

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

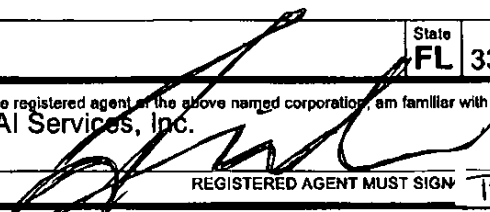
Zip Code

33331

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 named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

NRAI Services, Inc.

Signature of Registered Agent by: 

REGISTERED AGENT MUST SIGN

Tiniacha Clark, Asst. Secretary

Date

2/15/08

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		

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:



Daniel A. France, VP, Chief Financial Officer

Date

2/14/08 (203)513-3016

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/08

**OFFICERS AND DIRECTORS LIST
FOR
TOTALMOVE REAL ESTATE, INC.**

Officers

Name	Title	Address
Howard L. Wolk	CEO & Secretary	One Greenwich Place, Shelton, CT 06484
Kevin Buckthorpe	President & Treasurer	One Greenwich Place, Shelton, CT 06484
Clair Fennessey	Vice President	One Greenwich Place, Shelton, CT 06484

Directors

Name	Address
Howard L. Wolk	One Cabot Road, Medford, MA 02155
Kevin Buckthorpe	One Greenwich Place, Shelton, CT 06484
Joel E. Cutler	20 University Road, Suite 450, Cambridge, MA 02138
Thomas Gottlieb	Pier 5 The Embarcadero, Suite 102, San Francisco, CA 94111