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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

07-08

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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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
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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 Zip Code
FL 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.

Signature of
Registered Agent by: **NRAI Services, Inc.**

REGISTERED AGENT MUST SIGN

Tiniecha 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:

D France

Daniel A. France, VP, Chief Financial Officer

2/14/08 (203) 513-3016

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/22

**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