

1092

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
2007 NOV 28 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS																													
DOCUMENT # F05000007459 1. Corporation Name J.P. Morgan Investment Management Inc.																															
2. Principal Office Address - No P.O. Box # 245 Park Avenue Suite, Apt. #, etc.		3. Mailing Office Address 4 Chase Medrotech Center Suite, Apt. #, etc.																													
City & State New York, NY		City & State Brooklyn, NY																													
Zip 10167	Country USA	Zip 11245	Country USA																												
7. Name and Address of Current Registered Agent Name G T Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road Suite, Apt. #, Etc.		4. Date Incorporated or Qualified To Do Business in Florida 12/23/2005 5. FEI Number 13-3200244 6. CERTIFICATE OF STATUS DESIRED ☐ SEE INSTRUCTIONS FOR FILING THIS 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.																													
City Plantation		State FL	Zip Code 33324																												
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: <i>Sohan R. Dindyal</i> Sohan R. Dindyal REGISTERED AGENT MUST SIGN Assistant Secretary Date: 11/27/07																															
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) <table border="1"> <thead> <tr> <th>Title</th> <th>Name of Officers and/or Directors</th> <th>Street Address of Each Officer and/or Director</th> <th>City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>Pres</td> <td>Evelyn E. Geunzay</td> <td>245 Park Avenue</td> <td>New York, NY 10167</td> </tr> <tr> <td>COO</td> <td>John L. Oliva</td> <td>245 Park Avenue</td> <td>New York, NY 10167</td> </tr> <tr> <td>MD</td> <td>Bruce D. Gallant</td> <td>245 Park Avenue</td> <td>New York, NY 1016</td> </tr> <tr> <td>Sec</td> <td>Scott Richter</td> <td>1111 Polaris Parkway</td> <td>Columbus, OH 43240</td> </tr> <tr> <td>Asst Sec</td> <td>Kathleen Barabas</td> <td>245 Park Avenue</td> <td>New York, NY 10167</td> </tr> <tr> <td>Asst Sec</td> <td>James CP Berry</td> <td>4 Chase Medrotech Center</td> <td>Brooklyn, NY 11245</td> </tr> </tbody> </table>				Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	Pres	Evelyn E. Geunzay	245 Park Avenue	New York, NY 10167	COO	John L. Oliva	245 Park Avenue	New York, NY 10167	MD	Bruce D. Gallant	245 Park Avenue	New York, NY 1016	Sec	Scott Richter	1111 Polaris Parkway	Columbus, OH 43240	Asst Sec	Kathleen Barabas	245 Park Avenue	New York, NY 10167	Asst Sec	James CP Berry	4 Chase Medrotech Center	Brooklyn, NY 11245
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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 corporation hereby 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 110, 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: <i>James CP Berry</i> VP Date: 11/30/07 Daytime Phone: 718.242.2496 SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR																															

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CORPORATION REINSTATEMENT

J.P. MORGAN INVESTMENT MANAGEMENT INC.

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