

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


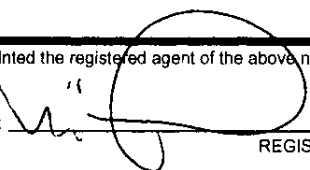
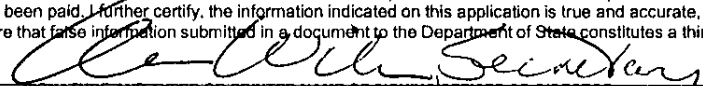
FILED

14 MAY 20 PM 1:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CR2E081 (11/10)

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05/20/14--01005--022 \*\*\$500.00

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS		14 MAY 20 PM 1:27  SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>DOCUMENT #</b> F12000003223					
1. Corporation Name MD SOLARSCIENCES CORP.					
2. Principal Office Address - No P.O. Box # 128 EAST AVENUE, LOBBY LEVEL Suite, Apt. #, etc.		3. Mailing Office Address 128 EAST AVENUE, LOBBY LEVEL Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 08/03/2012 5. FEI Number 271020344 6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
City & State NORWALK, CT		City & State NORWALK, CT			
Zip 06851	Country	Zip 06851	Country		
7. Name and Address of Current Registered Agent Name NRAI Services, Inc. Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Suite, Apt. #, Etc. 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  Date <u>5/9/2014</u> REGISTERED AGENT MUST SIGN					
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		
C	FRIEDMAN, ROBERT JDR.	128 East Avenue, Lobby Level	Norwalk, CT 06851		
D	RUCHEFSKY, STEVEN B	128 East Avenue, Lobby Level	Norwalk, CT 06851		
D	FRIEDMAN, SETH	128 East Avenue, Lobby Level	Norwalk, CT 06851		
VP	FRIEDMAN, SCOTT	128 East Avenue, Lobby Level	Norwalk, CT 06851		
D	Fishman, Alan	128 East Avenue, Lobby Level	Norwalk, CT 06851		
S	Willen, Ellen	128 East Avenue, Lobby Level	Norwalk, CT 06851		
10. E-mail Address: ewillen@mdsolarsciences.com (To be used for future annual report notification)					
11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.					
SIGNATURE: 		4/24/2014 203-857-0095 Date Daytime Phone #			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

R 4.5/20 1/16