


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>APPLICATION FOR REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">FILED</div> <div style="font-size: 1.2em; font-weight: bold; margin-bottom: 10px;">00 APR 21 PM 1:16</div> <div style="font-size: 0.8em;">SECRETARY OF STATE TALLAHASSEE, FLORIDA</div>	
<b>DOCUMENT # F93000002625</b> 1. Corporation Name  <b>March Capital Corp.</b>				<div style="font-size: 1.5em; font-weight: bold; margin-bottom: 10px;">REINSTATEMENT</div> <div style="font-size: 1.2em; font-weight: bold;">9440</div>	
Principal Place of Business <b>225 West Washington Street Chicago, IL 60606</b>		Mailing Address _____			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. _____ City & State _____ Zip _____ Country _____		3. New Mailing Address, If Applicable Suite, Apt. #, etc. _____ City & State _____ Zip _____ Country _____			
4. Date Incorporated or Qualified To Do Business in Florida <div style="text-align: center; font-weight: bold;">6/7/93</div>				5. FEI Number <div style="text-align: center; font-weight: bold;">36-3731454</div>	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 Directors)					
1	2	3	4		
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City/State/Zip		
President	Richard J. Rice	225 West Washington Street	Chicago, IL 60606		
VP	Charles Moore	225 West Washington Street	Chicago, IL 60606		
Asst. Sec.	Lynne M. Rice	225 West Washington Street	Chicago, IL 60606		
				<div style="font-size: 0.8em;">           800003230088-3            -05/01/00--01003--008            ***1650.00 ****322-08            LS 1650.00         </div>	
8. Name and Address of Current Registered Agent  <b>CT Corporation System 1200 South Pine Island Road Plantation, FL 33324</b>			9. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ Suite, Apt. #, Etc. _____ City _____ State <b>FL</b> Zip Code _____		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent <u><i>Jeffrey R. Graves</i></u> Date <b>4/20/00</b> <div style="text-align: center; font-size: 0.8em;">REGISTERED AGENT MUST SIGN <i>Asst. Secy.</i></div>					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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. 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 <u><i>Richard J. Rice</i></u> SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR <b>Richard J. Rice, President</b>			4/19/00 Date 312-640-0480 Daytime Phone #		