PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

**DIVISION OF CORPORATIONS** 

DOCUMENT # F 9100000 4719

1. Corporation Name

Ernst + Young Tech nologies, INC

FILED

01 APR -9 PM 3:49

SECRETARY OF STATE TALLAHASSEE, FLORIDA

14100 Suite, Apt.				-04/11/0101109004 ***1243.75 ***1208.75  REINSTATEMENT 98-01  4. Date Incorporated or Qualified To Do Business in Florida  1/9 8  5. FEI Number  Applied For					
Chan		Chantilly	VA	54-18	_	9	<b>⊢</b>	Applied For Not Applicable	
2015	1 Fairfax	20151	Fairfa x	6.		S DESIRED 🖎	\$8.75 Addition for a Certific	nal Fee required cate of Status	
. *	Suite, Apt. #, Etc.  Sity PLantation	on Systen or Acceptable) le Island	Road		State FL	Zip Code 3333	,		
<b>B.</b> I, being Signature o Registered	appointed the registered agent of the about	ve named corporation, am fa		bligations of secti	on 607.050 Date _	5 or 617.0503, i	_	**************************************	
9. Names	and Street Addresses of Each Officer and	l/or Director (Florida nonprot	fit corporations must list at le	east 3 directors)					
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip			
EO irecton	James Hunt	:/41.00	fark mewo	dow Dr Chantilly, UA 20151					
FO	John Hollerbach	14100	Park Meade	ä. Dr	Cha	ntilly	1/11/2	015%	

■ 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 filling 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 under section 119.07(3)(i), 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.

535 Madison AUE

535 madison Ave

1585 Broadway

535 madison Aue

SIGNATURE: \*

Chrmn

Thomas C Dircks

Jay M. GAtes

Bradley Feld

Steve Rubin

SIZNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN P. HOLLERRACH

210036