PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS EOBM.



CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

SECRETARY OF STATE TALLAHASSEE, FLORIDA

00 OCT -3 PH 4:50

DOCUMENT #

1. Corporation Name

Xpedior M Incorporated

2. Principal Office Address		3. Mailing Office Address	
1 North-Franklin Street		C/O CT Corporation System	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite: 1500		208 LaSalle Street	
City & State		City & State	
Chicago, -I1	linois-	Chicago, Illi	nois
Zip	Country	Zip	Country -
60606	USA	60604	USA

#3.53×6 B.R4		RESIT	2000
HEIN	SIAICE	AICIA I	2000

 Date Incorporated or Qualified To Do Business in Florida 11/02/98

5. FEI Number 36-4145081 Applied For Not Applicable

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required

7. Name and Address of	Current Registered Agent	
Name		
CT Corporation System		•
Street Address (P.O. Box Number is Not Acceptable)	200003457572	
1200 South Pine Island Road		10
Suite, Apt. #, Etc.	****750.00 *****75	เอ โกกก
		,,,,,,
City	State Zip Code	
Plantation	FL 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.
••	i, being appearate the registered agent of the above married corporation		

Signature of Registered Agent REGISTERED AGENT MUST SIGN

PATRICIA A. CANARIO,

SPECIAL ASSISTANT SECRETARY Date 1012/00

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	David N. Campbell	1 North Franklin Street Suite 1500	Chicago, IL 60606
Treas	Steven M. Isaacson	1 North Franklin Street Suite 1500	Chicago, IL 60606
Clerk	Caesar J. Belbel	l North Franklin Street Suite 1500	Chicago, IL 60606
Dir.	David N. Campbell	l North Franklin Street , Suite 1500	Chicago, IL 60606
Dir.	J. Brian Farrar	1 North Franklin Street Suite 1500	Chicago, IL 60606
Dir.	Peter T. Dameris*	l North Franklin Street Suite 1500	Chicago, IL 60606

^{10.1} 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CAESALJ. BerBer

781.685.4642

Daytime Phone #

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Board of Directors

David N. Campbell J. Brian Farrar James Crownover Marc J. Shapiro Peter T. Dameris Robert K. Hatcher

Please note that the following address is the same for all Directors:

1 North Franklin Street Suite 1500 Chicago, IL 60606