PLEASE READ ALL	INSTRUCTIONS E	SEFORE C	OMPLETI	NG THIS FORM	1.
	ORIDA DEPARTMENT  Katherine Hart  Secretary of State  DIVISION OF CORPORA	r OF STATE ris ate			FILES SRY OF STATE F CORPORATIO
DOCUMENT # <b>F9900002089</b> 1. Corporation Name				00 OCT 3	0 AM 9:35
PSINET CONSULTING SOLUTIONS ENTERPRISE GROUP, I			O(	-11/17/00- -11/17/00- ****150.00	-01072015
cipal Place of Business Mailing Address  30 POST OAK PARKWAY, SUITE 2500  USTON TX 77027  Mailing Address  4400 POST OAK PARKWAY, SUITE 25  HOUSTON TX 77027		2500			
	ncorrect information and enter co New Mailing Office Address, If Ap		Date Incorporate     To Do Busin	orated or Qualified ess in Florida	04/22/1999
4400 POST VOUT 12 FWMY: 1100 144		way : 1100	5. FEI Number	76-0556709	Applied For Not Applicable
Zip 17027 Country Zip  7. Names and Street Addresses of Each Officer and/or Dire	17027 Country	one must liet at lea		OF STATUS DESIRED 🔲 S	8.75 Additional Fee required for a Certificate of Status
Title(s)  1  Name of Officers and/or Directors	Stree	t Address of Each er and/or Director		City/	State / Zip
DYPS DAMERIS, PETER THE B. 4400 POST OAK  / D HORNE, KATHLEEN B. 44983 KINO		PARKWAY, SUF ( Sq Jame		HOUSTON TX 77027 AShburn, VP	20147-405
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/AS PIERCE, EDWARD L. 4400 POST OF		- Parkway, sun	; SUITE 1100 TE 250		17027
AS SIBLEY, BETH  8. Name and Address of Current Regis	4400 POST 0	at Parku	by; suite	1100 A Hous To	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD	Street Address (P.O. Box Number is Not Acceptable)				
PLANTATION FL 33324		Suite, Apt. #, Etc.  City State Zip Code			
registered rigeric	IRE REQU	and accept the ol	oligations of Secti	F	
11. I certify that I am an officer or director or the receiver or this reinstatement application, the reason for dissolution owed by the corporation have been paid and the names on this application is true and accurate, and my signature.	has been eliminated, the corpora of individuals listed on this form	ate name satisfies do not qualify for	the requirements an exemption und	of section 607.0401 or 617	.0401, F.S., that all fees

SIGNATURE AND TYPED OR PRINTED NAMED SIGNING OFFICER OR DIRECTOR
BETH SIBLEY
A SSISTANT SECRETARY

SIGNATURE:

8.23.00 713.54

Daytime Phone #





October 27, 2000

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## FEDERAL EXPRESS

Ms. Katherine Harris
Florida Department of State
Katherine Harris
Secretary of State
Division of Corporations
409 East Gaines St.
Tallahassee, FL 32399

RE: PSINet Consulting Solutions Global Group, Inc.
PSINet Consulting Solutions Enterprise Group, Inc.

PSINet Consulting Solutions, Inc.

Dear Ms. Harris,

I recently received Applications for Reinstatement for PSINet Consulting Solutions Global Group, Inc., PSINet Consulting Solutions Enterprise Group, Inc., and PSINet Consulting Solutions, Inc. I was very surprised to receive such applications, as I had not previously received the Annual Report, and therefore had no knowledge that these companies were not in compliance with Florida law. Accordingly, I would like to request a waiver from the Department of State with regard to the Reinstatement Fee of \$600.00 for each of the above-referenced entities.

I've enclosed the completed Applications for Reinstatement with respect to the above-referenced entities. I have also enclosed three checks in the amount of \$150.00 each to fulfill the Annual Report Fee and the Corporate Supplemental Fee for each of the companies.

I appreciate your consideration of my request regarding the waiver. If you should have any questions or require anything further please call me at 713.548.3466.

Very truly yours,

Beth Sibley

Senior Paralegal and Assistant Corporate Secretary

BS/edb

Enclosures (3)