

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F99000004315

1. Corporation Name

PSINET CONSULTING SOLUTIONS, INC.

Principal Place of Business

Mailing Address

4400 POST OAK PARKWAY, SUITE 1100
HOUSTON TX 77027

4400 POST OAK PARKWAY, SUITE 1100
HOUSTON TX 77027

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/20/1999

5. FEI Number

76-0588547

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
CEO S/D	WILLIS, MICHAEL T HORNE, KATHLEEN B.	4400 POST OAK PARKWAY, SUITE 110 44983 Knoll Square	HOUSTON TX 77027 Ashburn, VA 20147-4058
P	CEASE, LARRY E	TWO CHASE CORPORATE DRIVE, SUITE	BIRMINGHAM AL 35244
CFO D	STURGEON, JOSEPH SCHRAMER, WILLIAM L.	TWO CHASE CORPORATE DRIVE, SUITE 44983 Knoll Square	BIRMINGHAM AL 35244 Ashburn, VA 20147-4058
VSD V/AS	DAMERIS, PETER T PIERCE, EDWARD	4400 POST OAK PARKWAY, SUITE 110 4400 Post Oak Parkway, Suite 1100	HOUSTON TX 77027 HOUSTON, TX 77027
V AS	BURNS, ED SIBLEY, BETH	5252 CHEROKEE AVENUE, SUITE 400 4400 Post Oak Parkway, Suite 1100	ATLANTA GA 30338 HOUSTON, TX 77027
VAS V	PIERCE, EDWARD L LEWIS, ROBERT W.	4400 POST OAK PARKWAY, SUITE 110 4400 Post Oak Parkway, Suite 1100	HOUSTON TX 77027 HOUSTON, TX 77027

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

FL

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

REGISTERED AGENT MUST SIGN

Date

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., 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

BETH SIBLEY
ASSISTANT SECRETARY

10.23.00

Date

713.548-3466

Daytime Phone #



October 27, 2000

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,

A handwritten signature in cursive script that reads "Beth Sibley".

Beth Sibley
Senior Paralegal and Assistant Corporate Secretary

BS/edb

Enclosures (3)