FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

08 APR -3 PM 12: 04

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L05000031183

1. Limited Liability Company's Name

MAH Cignal Holdings, LLC

CR2E041 (12/07)

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
909 Ridgebrook Road		909 Ridgebrook Road	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite 220		Suite 220	
City & State		City & State	
Sparks, MD		Sparks, MD	
Zip	Country	Zip	Country
21152	USA	21152	USA

4. State/Country of Formation: Florida

5. Date Organized or Qualified To Do Business in Florida: March 30, 2005

6. FEI Number: 20-5719939 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street

Suite, Apt. #, Etc.:

City: Tallahassee | State: FL | Zip Code: 32301

☐ A $100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the $100 reinstatement be waived.

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent: Wanda L. Massey — Date: 3/27/08
REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Armando Cignarale	909 Ridgebrook Road, Suite 220	Sparks, MD 21152
			000121709990 09/31/08--01063--001 **377.50
	REINSTATEMENT	2007, 2008	

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company 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 of Managing Member/Manager: [signature] Date: 3/28/08 Daytime Phone #: 410-561-4901

Typed or printed name of signing Managing Member/Manager: Armando Cignarale

HODES, PESSIN & KATZ, P.A.
901 Dulaney Valley Road | Suite 400 | Towson, MD 21204
phone 410.938.8800 | fax 410.832.5600 | www.hpklegal.com

Gerald M. Katz
Phone: 410-339-6748
Fax: 410-832-5657
Email: gkatz@hpklegal.com

March 28, 2008

VIA FEDERAL EXPRESS
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: MAH Cignal Holdings, LLC – Limited Liability Company Reinstatement

Dear Sir/Madam:

Enclosed please find a Limited Liability Company Reinstatement for the above-referenced entity. Also enclosed is our check in the amount of $377.50 for the filing fee and annual report fees for 2007 and 2008.

Very truly yours,

Gerald M. Katz

Enclosure

cc: Mr. Armando Cignarale
Brian Woods, C.P.A.