

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF REVENUE
John Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

1. DOCUMENT # M00000002035

Name and Mailing Address

0008770 01 FP 0.352 **PRST HB 0 0615 10019-670899
DELOITTE CONSULTING (US) LLC
1633 BROADWAY
NEW YORK NY 10019-6708

02 DEC 20 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600009713786
12/27/02--01034--008 **5.00



2. New Mailing Address		4. State/Country of Formation DE	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 09/29/2000	
Principal Place of Business 1633 BROADWAY NEW YORK NY 10019	3. New Principal Place of Business Address City, State, Zip	6. FEI Number 13-4136678	Applied For Not Applicable
		7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	9. Name and Address of New Registered Agent Name City State Zip Code
---	--

10. 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 Cynthia L. Harris **Cynthia L. Harris as its agent** Date 12/20/02

REGISTERED AGENT MUST SIGN

11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR officer	SHAW, MARTIN J	1633 BROADWAY	NEW YORK NY 10019
MGR officer	MCCRACKEN, DOUGLAS M	1633 BROADWAY	NEW YORK NY 10019
MGR officer	SINGH, MANOJI	1633 BROADWAY	NEW YORK NY 10019
MGR officer	GLATZ, ROBERT J	1633 BROADWAY	NEW YORK NY 10019
MGR officer	RASMUSSEN, THOMAS J Quimlan, Joseph M	1633 BROADWAY	NEW YORK NY NY, NY 10019
MGR officer	DICK, DAVID	1633 BROADWAY	NEW YORK NY 10019

12. 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 David L. Dick Date 12/18/02 Daytime Phone # 212 492-3763

David L. Dick, Assistant Secretary

CR2E084 (8/02)