2004 LIMITED LIABILITY COMPANY REINSTATEMENT

SIGNATURE: SIGNATURE and TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED 2004 NOV 22- AM 10: 45 SECRETARY OF STATE

DOCUMENT # M0100000554 1. Entity Name GREENFIELD CLEARWATER, LLC					SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principat Plac	ce of Business	Mailing Address			1				
50 NORTH WATER ST. Norwalk, Ct 06854			50 NORTH WATER STREET South Norwalk, CT 06854						
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2. Principal Place of Business		3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		10252004 REIN-LLC CR2E101 (6/04)				
City & State		City & State	City & State		4. FEI Numb			_ 	olied For Applicable
Zip	Country	Zip	Zip Country		5. Certificate of Status Desired See Required				
	6. Name and Address of C	Current Registered Agent	1		7. Name and	Address of New F			
NDALCED	DVICES INC			Name	·. •				
NRAI SERVICES, INC. 526 E. PARK AVE.				Street Address	(P.O. Box Numb	er is Not Acceptable	e)		
IALLAHA	SSEE, FL 32301								
.				City			FL	Zip Code)
		ement for the purpose of changing its	s registere	ed office or registe	red agent, or bo	th, in the State of Fl	orida. I am fa	ımiliar with, a	and accept
the obligation	tions of registered agent.								
SIGNATURE	Signature, typed or printed name of registe	red agent and title if applicable. ~ (NO	TE: Registers	er Agent signature requi	ired when reinstating		- DATE		
FILE NOW!!! FEE IS \$50.00 In accordance with liability company die						•		•	
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	uary 1, 2005, Fee will be \$1	1 Participation and a community of the co	s. 607.1 d not red	93(2)(b), F.S., the elve the prior no	ne limited tice.		a Departme		
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