

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # M01000001218	
1. Entity Name TEMPLETON INVESTMENT COUNSEL, LLC	

FILED
07 MAR 30 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 500 E. BROWARD BLVD., STE. 2100 FORT LAUDERDALE, FL 33391-3091	Mailing Address ONE FRANKLIN PKWY LEGAL SM 920/2 SAN MATEO, CA 94403-1906 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

03152007 REIN-LLC CR2E101 (1/07)

4. FEI Number 94-3385113	Applied For Not Applicable
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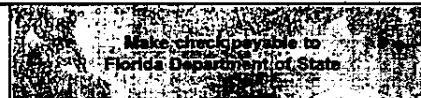
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent SEIDMAN, LAURA R 500 E. BROWARD BLVD. FORT LAUDERDALE, FL 33391-3091	7. Name and Address of New Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 Pine Island Road City Plantation FL Zip Code 33324
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Jennifer Quinn **Jennifer Quinn** **Assistant Secretary** DATE 3/26/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$200.00



9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM TEMPLETON WORLDWIDE, INC. 500 E. BROWARD BLVD., STE. 2100 FT. LAUDERDALE, FL 333943091 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition 300095918323 04/05/07--01056--024 **200.00
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REINSTATEMENT

2006-2007

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Barbara J. Green March 22, 2007 650.525.7188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #