PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
11 APR 28 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M03000003054

1. Limited Liability Company's Name
Clark Surety Services, LLC

CR2E041 (1/11) 10-11

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
7500 Old Georgetown Road	7500 Old Georgetown Road
Suite, Apt. #, etc.	Suite, Apt. #, etc. Attn: Legal Department
City & State: Bethesda, MD	City & State: Bethesda, MD
Zip: 20814 Country: U.S.	Zip: 20814 Country: U.S.

4. State/Country of Formation: Maryland
5. Date Organized or Qualified To Do Business in Florida: 04/06/2004
6. FEI Number: 56-2447399 ☐ 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: CT Corporation System
Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road
Suite, Apt. #, Etc.
City: Plantation State: FL Zip Code: 33324

E-mail Address:
000205747GD
04/29/11--01005--006 **377.50
legal@clarkconstruction.com
(To be used for future annual report notices)

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 Jimena Fernandez Vice President and Assistant Secretary Date 4/26/11
REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Harold K. Roach	7500 Old Georgetown Road	Bethesda, MD 20814
MGR	Robert D. Moser, Jr.	7500 Old Georgetown Road	Bethesda, MD 20814
MGR	Susan Williamson Ross	7500 Old Georgetown Road	Bethesda, MD 20814
MGR	James A. Hooff	7500 Old Georgetown Road	Bethesda, MD 20814
MGR	John P. O'Keefe	7500 Old Georgetown Road	Bethesda, MD 20814
MGR	Dale S. Rosenthal	7500 Old Georgetown Road	Bethesda, MD 20814

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 608.408, 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Managing Member/Manager Date 4/25/2011 Daytime Phone # 301-272-8100

Typed or printed name of signing Managing Member/Manager James A. Hooff

FL110 - 01/19/2011 C T System Online