

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M08000005587

FILED
Dec 10, 2009
Secretary of State

Entity Name: SUNTRUST INSTITUTIONAL INVESTMENT ADVISORS LLC

Current Principal Place of Business:

303 PEACHTREE STREET N.E., STE. 3200
ATLANTA, GA 30308

New Principal Place of Business:

Current Mailing Address:

303 PEACHTREE STREET N.E., STE. 3200
ATLANTA, GA 30308

New Mailing Address:

303 PEACHTREE STREET N.E. - 36TH FL
C/O HASANA R. KELLY
ATLANTA, GA 30308

FEI Number: 26-3630870 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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.

SIGNATURE: MAUREEN TATHELL

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PETERS, MARK A
Address: 303 PEACHTREE STREET N.E., STE. 3200
City-St-Zip: ATLANTA, GA 30308

Title: MGR () Delete
Name: YARBROUGH, STEPHEN
Address: 303 PEACHTREE STREET N.E., STE. 3200
City-St-Zip: ATLANTA, GA 30308

Title: MGR () Delete
Name: MCKNIGHT, ALAN
Address: 303 PEACHTREE STREET N.E., STE. 3200
City-St-Zip: ATLANTA, GA 30308

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ACS () Change (X) Addition
Name: KELLY, HASANA R
Address: 303 PEACHTREE STREET NE - 36TH FL
City-St-Zip: ATLANTA, GA 30308

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: HASANA R KELLY

ACS

12/10/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date