

# 2012 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED**  
**Oct 17, 2012**  
**Secretary of State**

DOCUMENT# M11000004479

**Entity Name:** THE CLOVIS GROUP, L.L.C.

**Current Principal Place of Business:**

10411 MOTOR CITY DRIVE, SUITE 450  
BETHESDA, MD 20817

**New Principal Place of Business:**

**Current Mailing Address:**

10411 MOTOR CITY DRIVE, SUITE 450  
BETHESDA, MD 20817

**New Mailing Address:**

**FEI Number:** 52-2283536

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 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: NRAI SERVICES, INC.

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BELLUCK, DAVID  
Address: 699 BOYLSTON STREET, 8TH FLOOR  
City-St-Zip: BOSTON, MA 02116

Title: MGR  
Name: BLASCO, IAN  
Address: 699 BOYLSTON STREET, 8TH FLOOR  
City-St-Zip: BOSTON, MA 02116

Title: MGR  
Name: DREYER, KEN  
Address: 30 AUDUBON ROAD  
City-St-Zip: WAKEFIELD, MA 01880

Title: MGR  
Name: MACKEEN, DAVID  
Address: 30 AUDUBON ROAD  
City-St-Zip: WAKEFIELD, MA 01880

Title: MGR  
Name: TALIAFERRO, MONA  
Address: 30 AUDUBON ROAD  
City-St-Zip: WAKEFIELD, MA 01880

Title: MGR  
Name: DIAMOND, GREG  
Address: 10411 MOTOR CITY DRIVE, SUITE 450  
City-St-Zip: BETHESDA, MD 20817

I hereby 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: MELISSA KLINE

MS

10/17/2012

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