APPLICATION FOR REINSTATEMENT OF LIMITED LIABILITY COMPANY

M96000000391

FILED

97 DEC 16 PM 3:19

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company

DOCUMENT # M96000000391

Deloitte & Touche Consulting Group LLC
1633 Broadway
New York, NY 10019
(c/o Karen Watson)

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

1a. Principal Place of Business Address

1633 Broadway
New York, NY 10019

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip | Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip | Country

3. Date Organized or Qualified: 10/10/96

3a. State of Formation: Delaware

4. FEI Number: 06-1454515

☐ Applied For
☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired
$8.75 Additional Fee Required ☒

7. Name and Address of Current Registered Agent

Corporation Service Company
1201 Hayes Street
Tallahassee, FL 32301

8. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City | FL | Zip Code

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: Dail Shelly (REGISTERED AGENT'S SIGNATURE) Date: 12-16-97

10. Title	Managing Members/Managers	Business Street Address	City, State & Zip Code
MGR	Deloitte & Touche Consulting Group Holding LLC	1633 Broadway	New York, NY 10019

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REINSTATEMENT 1997

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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 608.406, 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.

Signature of Managing Member/Manager: Deloitte & Touche Consulting Group Holding LLC, Managing Member
by: Robert T. Glatz CFO

Date: 12/4/97 Daytime Phone # 212-489-1600

Typed or printed name of signing Managing Member/Manager