PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. LIMITED LIABILITY FILED FLORIDA DEPARTMENT OF STATE COMPANY Secretary of State REINSTATEMENT **DIVISION OF CORPORATIONS** 006 JUL 10 PM 4: 13 DOCUMENT # M98000001446 SECRETARY OF STATE LLAHASSEE. FLORIDA 1. Limited Liability Company's Name Ridgebury Funding L.L.C. CR2E041 (8/05) 3. Mailing Office Address 2. Principal Office Address 10 Riverview Drive 44 Old Ridgebury Road State/Country of Formation Delaware Suite, Apt. #, etc. Suite, Apt. #, etc. Attn: Licensing/ Kapil 5. Date Organized or Qualified 11/10/1998 To Do Business in Florida City & State City & State Applied For Danbury, CT **86-1530093** Danbury, CT Not Applicable Country Country \$5.00 Additional Fee required 06810 USA 06810 USA CERTIFICATE OF STATUS DESIRED for a Certificate of Status 8. Name and Address of Current Registered Agent C T Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Suite, Apt. #, Etc. Plantation Zip Code 33324 9. I, being appointed the registered agent of the above damed limited liability company, am familiar with and accept the obligations of Chapter 608, F.S. Signature of Registered Age REGISTERED AGENT MUST SIGN 10. Names and Street Addresses of Managing Members/Managers Name of Managing Members/Managers Street Address of Each Titles City / State / Zip Managing Member/Manager Manager Kapil Kundrai 10 Riverview Drive Danbury, CT 06810 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 Date 4/24/06 Daytime Phone # 866-844-4046 Managing Member/Manager KUNDRAÌ Typed on printed name of signing Managing Member/Manager