PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	ORATION TATEMENT	A DEPARTMENT OF STATE Secretary of State VISION OF CORPORATIONS		710,ED 18 JUN 11 AM 4: 31		
DOCUMENT # N15000012150 1 Corporation Name					SERRETART OF STATE TALLAHASSEE FLERIDA	
CRESCEN	NT CENTRAL STATION (CONDOMINI	IUM ASSOCI.	ATION, INC.		
			Office Address		1	
480 N Orange Ave. 10 State			House Square, 15th Floor		<u> </u>	CR2E081 (11/10)
	-	State, Apr. 9,	e.c.			porated or Qualified
City & State City & State			1 -		12/17/201	
			rtford, CT		5. FET Numb	Applied For
_{Др} 32801	USA 06103-3				D. CERTIFICATE OF STATUS DESIRED 38 75 Additional Fee requir for a Certificate of Status	
Name	7. Name and Address	of Current Regis	stered Agent	·		
Corporation Service Company					i	
Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street					800314556888	
Suite, Apr. #, Etc					ł	
CAN			State	Zip Code	i	
Tallahassee	e		FL	32301		
8. I, being appo Signature of Registered Ager		REGISTERED AG	Mu	Roxan	ne Turne ne Preside	0.11.
9. Names and	Street Addresses of Each Officer a	nd/or Director (Flo	nda nonprofit corp	orations must list at lea	ist 3 directors)	
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip
Dir/P	Marcia N. Curtin		10 State House Square, 15th Floor		5th Floor	Hartford, CT 06103-3604
Dir/VP	Jonathan Coombes		10 State House Square, 15th Floor		5th Floor	Hartford, CT 06103-3604
Dir	Marc Reicher		ChampionsGate Blvd., Suite 104		uite 104	ChampionsGate, FL 33896
Sec	Connie Mendez		480 N Orange Ave.		·	Orlando, FL 32801
Treas	Michele Brice		100 Colonial Center Pkwy., Suite 170		Suite 170	Lake Mary, FL 32746
^{0.} E-mail Ac	ddress; patricia.reidy@ul	bs.com	(Talka sana)	or future annual report r		
reinstatement owed by the c	application, the reason for dissolute orporation have been paid, I further	on has been elima certify, the informa	powered to execute nated, the corporate aton indicated on the	this application as pre- name satisfies the re- nis application is true a	ovided for in chap quirements of se indincourate, and	oter 607 or 617. F.S. Hurther certify that when filing this coon 607 0401 or 617.0401, F.S., and that all lees d my signature shall have the same legal effect as egice lehony as provided for in s 817.155, F.S.
SIGNATUR	E M MOCL		Curtin, F			6/8/2018 860 616-9041

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 249305 5040118

AUTHORIZATION : Could be on a

COST LIMIT : \$ G58.75

ORDER DATE : June 8, 2018

ORDER TIME : 9:04 AM

ORDER NO. : 249305-015

CUSTOMER NO: 5040118

DOMESTIC FILINGS

NAME: CRESCENT CENTRAL STATION

CONDOMINIUM ASSOCIATION, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - Ext#

EXAMINER'S INITIALS

18 JUN 11 AM 10: 52