

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000068671

**FILED**  
**Oct 05, 2010**  
**Secretary of State**

**Entity Name:** SFC ACQUISITION CORPORATION

**Current Principal Place of Business:**

C/O AEA INVESTORS LP  
55 EAST 52ND STREET, FL 35  
NEW YORK, NY 10055

**New Principal Place of Business:**

**Current Mailing Address:**

C/O AEA INVESTORS LP  
55 EAST 52ND STREET, FL 35  
NEW YORK, NY 10055

**New Mailing Address:**

**FEI Number:** 27-0397028

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** C T CORPORATION SYSTEM

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** CD  
**Name:** BALL, DAMON H  
**Address:** 55 EAST 52ND STREET, FL 35  
**City-St-Zip:** NEW YORK, NY 10055

**Title:** PD  
**Name:** VALDES-PAGES, RAUL  
**Address:** 55 EAST 52ND STREET, FL 35  
**City-St-Zip:** NEW YORK, NY 10055

**Title:** VP  
**Name:** COZZI, JOHN F  
**Address:** 55 EAST 52ND STREET, FL 35  
**City-St-Zip:** NEW YORK, NY 10055

**Title:** VTD  
**Name:** CARLSON, BARON J  
**Address:** 55 EAST 52ND STREET, FL 35  
**City-St-Zip:** NEW YORK, NY 10055

**Title:** VSAT  
**Name:** BEVACQUA, AMY C  
**Address:** 55 EAST 52ND STREET, FL 35  
**City-St-Zip:** NEW YORK, NY 10055

**Title:** VS  
**Name:** KRIEGER, SANFORD  
**Address:** 55 EAST 52ND STREET, FL 35  
**City-St-Zip:** NEW YORK, NY 10055

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** RAUL VALDES-PAGES

PD

10/05/2010

Electronic Signature of Signing Officer or Director

Date