2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P14062

Entity Name: CHARISMA INVESTMENT COMPANY, INC.

FILED Jan 26, 2010 Secretary of State

FILING CANCELLED RETURNED CHECK

Current Principal Place of Business:

C/O ING CLARION PARTNERS, 230 PARK AVE

12TH FLOOR

NEW YORK, NY 10169

Current Mailing Address:

New Mailing Address:

New Principal Place of Business:

C/O ING CLARION PARTNERS, 230 PARK AVE 12TH FLOOR

NEW YORK, NY 10169

FEI Number: 13-3110404 FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 U

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: ANUSHA PUTTY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD

Name: HASHMI, EJAZ A
Address: 2550 M STREET NW
City-St-Zip: WASHINGTON, DC

Title: F

Name: AL-FARDAN, FARDAN Address: 2550 M ST NW City-St-Zip: WASHINGTON, DC

Title: VD

Name: AL MAZROEI, HILAI SUHAIL Address: 2550 M STREET NW City-St-Zip: WASHINGTON, DC

Title:

Name: STOLBACH, RICHARD

Address: C/O PATTON BOGGS LLP, 2550 M STREET NW

City-St-Zip: WASHINGTON, DC 20037

Title: VP

Name: AL MAZEOWI, HILAL SUHAIL

Address: C/O PATTON BOGGS LLP, 2550 M STREET NW

City-St-Zip: WASHINGTON, DC 20037

Title: VP

Name: FACOMPRE, JAMES

Address: C/O ING CLARION PARTNERS, 230 PARK AVE, 12

City-St-Zip: NEW YORK, NY 10169

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: JAMES FACOMPRE VP 01/26/2010