PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 DEC -4 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P16042

1. Corporation Name

Chase Mahattan Capital Finance Corp.

Principal Place of Business	Mailing Address
Two Chase Manhattan Plaza 24th Floor New York, NY 10081	Same

REINSTATEMENT 97

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
2 Chase Manhattan Plaza	
Suite, Apt. #, etc.: 24th Floor	Suite, Apt. #, etc.
City & State: New York, NY	City & State
Zip: 10081 Country: USA	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 13-3414427 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ **$8.75 Additional Fee required for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State Zip
Pres/Dir.	Scott E. Stein	2 Chase Manhattan Plaza	New York, NY 10081
VP	Sandra Sojka	600 5th Ave. - 4th Floor	New York, NY 10020
Sec.	Joanne D. Rosenthal	2 Chase Manhattan Plaza	New York, NY 10081
Treas/Dir.	Frank Giorgio	2 Chase Manhattan Plaza	New York, NY 10081

12-4-97

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8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

CR2E040 (12/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Theresa Taylor, Asst. V.P. Date: 11/18/97
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. 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: _____ - Sandra Sojka, VP (212) 332-4208
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2 of 2

THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 477907 4357720

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 915.00

ORDER DATE : July 29, 1997

ORDER TIME : 9:12 AM

ORDER NO. : 477907-210

CUSTOMER NO: 4357720

CUSTOMER: Ms. Margaret L. Foulds
BLUE SKY MLS

201 Rte. 17 / Ste. 300
The Meadows Complex
Rutherford, NJ 07070

REINSTATEMENT

NAME: CHASE MANHATTAN CAPITAL
FINANCE CORPORATION

EFFECTIVE DATE:

97 DEC -4 AM 10:16
DIVISION OF CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

EXAMINER'S INITIALS: JB 12-4-97