PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 OCT -6 PM 1:46

SECRETARY OF STATE
TALLAHASSEE FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P25171

REINSTATEMENT 02-03

1. Corporation Name

THE WASHINGTON CONSULTING GROUP, INCORPORATED

2. Principal Office Address	**3.** Mailing Office Address
4915 AUBURN AVENUE	4915 AUBURN AVENUE
Suite, Apt. #, etc.: SUITE 301	Suite, Apt. #, etc.: SUITE 301
City & State: BETHESDA, MD	City & State: BETHESDA, MD
Zip: 20814 Country:	Zip: 20814 Country:

4. Date Incorporated or Qualified To Do Business in Florida: 07/13/1989

5. FEI Number: 52-1157088 ☐ Applied For ☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name: JOHN KNISLEY

Street Address (P.O. Box Number is Not Acceptable): 37075 AVIATION LANE

700023555207
10/03/03--01086--020 **900.00

Suite, Apt. #, Etc.:

City: HILLARD State: FL Zip Code: 32046-5002

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: John H Knisley — REGISTERED AGENT MUST SIGN

Date: 10/01/03

CR2E081 (10/02)

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PTD	ARMANDO C. CHAPELLI, JR.	4915 AUBURN AVE., STE 301	BETHESDA, MD 20814
S	JOHN A. MARTIN	4915 AUBURN AVE., STE 301	BETHESDA, MD 20814

10. 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: John Martin — JOHN A. MARTIN - SECRETARY/CFO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 9/23/03

Daytime Phone #: (301) 664-5897

10/6