# CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JUL 19 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P30090

1. Corporation Name
ABB Credit Inc.

REINSTATEMENT 01-04 TR

| 2. Principal Office Address | 3. Mailing Office Address |
|---|---|
| 120 Long Ridge Road | 120 Long Ridge Road |
| Suite, Apt. #, etc.: 3rd Floor | Suite, Apt. #, etc.: 3rd Floor |
| City & State: Stamford, CT | City & State: Stamford, CT |
| Zip: 06927 Country: USA | Zip: 06927 Country: USA |

4. Date Incorporated or Qualified To Do Business In Florida: 7/9/90

5. FEI Number: 13-3551282 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $5.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: C T Corporation System

Street Address (P.O. Box Number Is Not Acceptable): 1200 South Pine Island Road

Suite, Apt. #, Etc.:

City: Plantation State: FL Zip Code: 33324

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: Sylvia Acosta-Gray SYLVIA AVENTA-GRAY SPECIAL ASSISTANT SECRETARY 7/19/04
REGISTERED AGENT MUST SIGN

CR2E061 (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 |
|---|---|---|---|
| PRES | Robert L. Lewis | 120 Long Ridge Road | Stamford, CT 06927 |
| VP | Colleen P. Harkness | 120 Long Ridge Road | Stamford, CT 06927 |
| TREAS | RicardoSilva | 260 Long Ridge Road | Stamford, CT 06927 |
| DIR | John Bober | 120 Long Ridge Road | Stamford, CT 06927 |
| | | | |
| | | | |

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 Bober 203-357 4895
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date 7/14/04 — Daytime Phone #

# Florida Department of State
## Division of Corporations
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# CORPORATION REINSTATEMENT

## ABB CREDIT INC.

| | |
|---|---|
| Certificate of Status | 0 |
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