

08-20-01

12:08pm

From: Steel Hector & Davis

561-655-1508

T-554 P.004

F-878

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P-33368

1. Corporation Name

Citicorp Investment Services

2. Principal Office Address

One Court Square

Suite, Apt. #, etc.

24th Floor

City & State

Long Island City, NY

Zip

11120

Country

US

3. Mailing Office Address

One Court Square

Suite, Apt. #, etc.

24th Floor

City & State

Long Island City, NY

Zip

11120

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

3/29/91

5. FEI Number

13-3502968

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒\$2.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CT 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

EDWARD GWISDALLA

Assistant Vice President

Date 9-10-01

REGISTERED AGENT MUST SIGN

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
General Counsel	Donna Daniels	One Court Square 24 th FL	Long Island City, NY 11120
Chief Ops Officer	Tony Fedele	One Court Square 24 th FL	Long Island City, NY 11120
CFO	Therita KilKenny	One Court Square 24 th FL	Long Island City, NY 11120
President	Bill Maguire	One Court Square 49 th FL	Long Island City, NY 11120
Compliance Director	Scott Schroeder	One Court Square 24 th FL	Long Island City, NY 11120
Director	Barbara Wolfson	111 WALL Street 3rd FL	New York, NY 10013

10. I certify that I am an officer or director of 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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Scott Schroeder, Compliance Director

Date

Daytime Phone #

9/7/01 - 718-248-3115

C200001 (9/00)

CITICORP+
INVESTMENT SERVICES

One Court Square
24th Floor
Long Island City, NY 11120

Compliance

September 7, 2001

Florida Department of State
407 East Gaines Street
Tallahassee, FL 32399

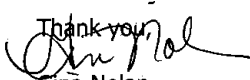
RE: Citicorp Investment Services
Foreign Corporation Filing

Dear Sir or Madam,

Enclosed please find the Corporation Reinstatement form for Citicorp Investment Services. I have attached a check in the amount of \$908.75 for the filing fees.

If you should have any questions please feel free to contact me at 718-248-3763.

Thank you,


Gina Nolan
Compliance Dept.