PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
04 APR 16 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000097723

REINSTATEMENT 99-04

1. Corporation Name
T15 Acquisiiton Corp.

2. Principal Office Address	3. Mailing Office Address
273 Corporate Boulevard	P.O. Box 8749
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Suite 100	
City & State	City & State
Portsmouth, NH	Princeton, NJ
Zip / Country	Zip / Country
03801 / USA	08543-8749 / USA

4. Date Incorporated or Qualified To Do Business in Florida: November 19. 1998

5. FEI Number: 65-0896120 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional fee required for Certification of Status.

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 S. 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: Barbara A Burke Date: 4.15.04

Barbara A. Burke, Spec. Asst. Secy. REGISTERED AGENT MUST SIGN

CR2E085 (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
P	Edward D. Breen	273 Corporate Drive, Suite 100	Portsmouth, NH 03801
Secy/D	M. Brian Moroze	273 Corporate Drive, Suite 100	Portsmouth, NH 03801
Treas.	Martina Hund-Mejean	273 Corporate Drive, Suite 100	Portsmouth, NH 03801

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: Edward D Breen Edward D. Breen 4/15/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FLR10 - (05/2003 C T System Online

Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT

T15 ACQUISITION CORP.

Certificate of Status	0
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