PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

* * * * * * * * * * * * * * * * * * * *							
	PRATION ATEMENT		A DEPARTMENT OF STA Secretary of State ASION OF CORPORATIONS		FILED JUL 25 PM 4: 48		
DOCUMENT # F02 00000 6274				cr.	SECRETARY OF STATE		
1. Corporation N	√ame		•	TAI	LAHASSEE, FLORIDA		
Radware, Ir	16,						
2. Principal Offic	ce Address - No P.O. Box#	3. Mailino (Office Address				
575 Corporate Drive		1	575 Corporate Drive				
Suite, Apt. #, etc.		I	Suite, Apt. #, etc.		CR2E081 (11/10)		
Lobby 2	Lobby 2		Lobby 2		Date Incorporated or Chalified To Do Business in Florida		
City & State		,	City & State		12/17/2002 Der Applied For		
Mahwah, NJ		Mahwah,			Not Applica		
zip 07430	USA	2ip 07430	USA	6. CERTIFIC	S8.75 Admittonal Fee req for a Certificate of Sta	uired tus	
	7. Name and Ad	idress of Current Regi	stered Agent				
Corporation	Service Company					İ	
	P.O. Box Number is Not Ad	Ceptable)				-	
1201 Hays 9							
Suite, Apr. #, Etc							
1				_	300262685918		
Cay Tallahassee			State Zp Code FL 32301	•	00202003310		
Tallahassee		fine above named corp	FL 32301 oration, am familiar with and accept	the obligations of se			
Tallahassee		Dia	FL 32301 oration, am familiar with and accept Emily C	the obligations of se			
Tallahassee 8. I, being appo Signature of Registered Agen	inted the registered agent o	REGISTEREDA	FL 32301 oration, am familiar with and accept Emily C	i the obligations of sec TRY			
Tallahassee 8. I, being apportune of Registered Agents 9. Names and	inted the registered agent o	REGISTEREDA	FL 32301 oration, am familiar with and accept Emily C	I the obligations of sec Pray resident st at least 3 directors)	Date 125 14		
Tallahassee 8. I, being appo Signature of Registered Agen	inted the registered agent of	REGISTERED A	FL 32301 oration, am familiar with and accept Emily C SENT MUST SKSN Asst. Vice P orlds nonprofit corporations must lis	i the obligations of sec TRY resident st at least 3 directors)			
Tallahassee 8. I, being apportune of Registered Agents 9. Names and	inted the registered agent o	REGISTERED A	FL 32301 oration, am familiar with and accept Emily C SENT MUST SKGN ASSA. Vice P orida nonprofit corporations must lis	I the obligations of so TRY TESECONT Is at least 3 directors)	Date 125 14		
Tallahassee 8. I, being appo Signature of Registered Agent 9. Names and 3 Titles	Street Addresses of Each Officers and/or D	REGISTERED A	oration, am familiar with and accept Emily C SENT MUST SIGN Orlica nonprofit corporations must lis Street Address of Officer and/or Di	I the obligations of so TRY TESECONT Is at least 3 directors)	City / State / Zip		
Tallahassee 8. I, being appo Signature of Registered Agent 9. Names and 3 Titles	Street Addresses of Each Officers and/or D	REGISTERED A	oration, am familiar with and accept Emily C SENT MUST SIGN Orlica nonprofit corporations must lis Street Address of Officer and/or Di	I the obligations of so TRY TESECONT Is at least 3 directors)	City / State / Zip		
Tallahassee 8. I, being appo Signature of Registered Agent 9. Names and 3 Titles	Street Addresses of Each Officers and/or D	REGISTERED A	oration, am familiar with and accept Emily C SENT MUST SIGN Orlica nonprofit corporations must lis Street Address of Officer and/or Di	I the obligations of so TRY TESECONT Is at least 3 directors)	City / State / Zip		
Tallahassee 8. I, being appo Signature of Registered Agent 9. Names and 3 Titles	Street Addresses of Each Officers and/or D	REGISTERED A	oration, am familiar with and accept Emily C SENT MUST SIGN Orlica nonprofit corporations must lis Street Address of Officer and/or Di	I the obligations of so TRY TESECONT Is at least 3 directors)	City / State / Zip		
Tallahassee 8. I, being appo Signature of Registered Agent 9. Names and 3 Titles	Street Addresses of Each Officers and/or D	REGISTERED A	oration, am familiar with and accept Emily C SENT MUST SIGN Orlica nonprofit corporations must lis Street Address of Officer and/or Di	I the obligations of so TRY TESECONT Stat least 3 directors) Each rector	City / State / Zip		
Tallahassee 8. I, being apportune of Registered Agent 9. Names and Titles	Street Addresses of Each Officers and/or D	REGISTERED A	oration, am familiar with and accept Emily Can't MUST SKSN Asst. Vice Portion and accept Street Address of Officer and/or Dispersion of Carporate Drivers and/or Dispersion of Carporate Drivers and C	I the obligations of sec 1789 recorded st at least 3 directors) Each rector e, Lobby 2	City / State / Zip		
Tallahassee 8. I, being appo Signature of Registered Agent 9. Names and 3 Titles VP 10. E-mail Ad 11. Certify that I a reinstatement	Street Addresses of Each O Name of Officers and/or D Miki Katt ddress: miki.katz@: am an officer or director or trapplication, the reason for dresses of the control of	REGISTERED AN fficer and/or Director (F hirectors Z	FL 32301 oration, am familiar with and accept Emily Committee Programmer Address of Officer and/or Discordance and/or Discorda	the obligations of seconds. It is at least 3 directors) Each rector e, Lobby 2 report notification) n as provided for in chas the requirements of	City / State / Zip Mahwah, NJ 07430 apter 507 or 617, F.S. I further certify that when filing this section 607.0401 or 617.0401, F.S., and that all fees		
Tallahassee 8. I, being appo Signature of Registered Agent 9. Names and 1 Titles VP 10. E-mail Ad 11. I certify that I s reinstatement owed by the ci	Street Addresses of Each Officers and/or Discressing Miki Katz Idress: miki katz@r am an officer or director or to application, the reason for dopporation have been paid.	REGISTERED AN Inflorer and/or Director (Financiars Z Tadware.com The received or trustee or further carify, the information has been elim further carify, the information for the carify, the information of the carify of	FL 32301 oration, am familiar with and accept Emily C Emily C Asst. Vice P order and/or Di Street Address of Officer and/or Di 575 Corporate Drive [To be used for future annual impowered to execute this application insted, the corporate name satisfier and/or indicated on this application indicated on this application.	report notification) as as provided for in charter of a street or	City / State / Zip Mahwah, NJ 07430 spiter 507 or 617, F.S. I further certify that when filing this		
Tallahassee 8. I, being appo Signature of Registered Agent 9. Names and 1 Titles VP 10. E-mail Ad 11. I certify that I s reinstatement owed by the ci	Street Addresses of Each O Name of Officers and/or D Miki Katz Miki Katz am an officer or director or ti application, the reason for dorporation have been paid. I oath. I am aware that false is E:	REGISTERED AN AMERICAN AND THE PROPERTY OF THE	FL 32301 oration, am familiar with and accept Emily C Emily C Asst. Vice P order and/or Di Street Address of Officer and/or Di 575 Corporate Drive [To be used for future annual impowered to execute this application insted, the corporate name satisfier and/or indicated on this application indicated on this application.	report notification) n as provided for in che is the requirements of a time constitutes a third tale constitutes a third tale constitutes a third	City / State / Zip Mahwah, NJ 07430 spiter 507 or 617, F.S. I further certify that when filing this spection 607.0401 or 617.0401, F.S., and that all fees and my signature shall have the same legal effect as	3226	