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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F07000005765

1. Corporation Name
Kentrox, Inc.

2. Principal Office Address - No P.O. Box #
5800 Innovation Drive

3. Mailing Office Address
5800 Innovation Drive

City & State
Dublin, OH

City & State
Dublin, OH

Zip Country
43016 USA

4. Date Incorporated or Qualified To Do Business in Florida
11/28/2007

5. FEI Number
20-1198189

6. CERTIFICATE OF STATUS DESIRED Not Applicable

7. Name and Address of Current Registered Agent

Name
NRAI Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)
2731 Executive Park Drive

City
Weston

State Zip Code
FL 33331

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent *by: Deetta A. McLeod, Asst. Sec.* Date **12-3-2009**

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Please 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/D	Richard Cremona	5800 Innovation Drive	Dublin, OH 43016
S/CFO	Michael Patrick Keegan	5800 Innovation Drive	Dublin, OH 43016
D	Glenn Luk	5800 Innovation Drive	Dublin, OH 43016
D	Anand Radhakrishnan	5800 Innovation Drive	Dublin, OH 43016
SEE ATTACHMENT A			

10. E-mail Address:

11. 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. I further certify 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: *Michael P. Keegan, EVP, CFO* Date **12/3/09**

SIGNATURE AND TITLED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR Date Daytime Phone #

REINSTATEMENT

CR2ED01 (11/09)

08-09
12/4/09

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ATTACHMENT A

B. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Rick Mace	5800 Innovation Drive	Dublin, OH 43016
D	George Schmitt	5800 Innovation Drive	Dublin, OH 43016
D	Charles Vogt	5800 Innovation Drive	Dublin, OH 43016

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6384

From: Account Name : INCORPORATING SERVICES FL
Account Number : I20050000052
Phone : (302) 531-0855
Fax Number : (850) 656-7953

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Adavis@incserv.com

CORPORATION REINSTATEMENT
KENTROX, INC.

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