PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 DEC 26 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000006290

1. Corporation Name

KVH INDUSTRIES, INC.

REINSTATEMENT 2002

Principal Place of Business	Mailing Address
50 ENTERPRISE CENTER MIDDLETOWN RI 02842	50 ENTERPRISE CENTER MIDDLETOWN RI 02842

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 12/01/1997

5. FEI Number: 05-0420589 ☐ Applied For ☐ Not Applicable

6. ☐ CERTIFICATE OF STATUS DESIRED — $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
~~VP~~ CEO	~~BENNETT, SIDNEY M~~ MARTIN KITS VAN HEYNINGEN	~~1301 N. DEARBORN PARKWAY, #706~~ 50 ENTERPRISE CENTER	~~CHICAGO IL 60610~~ MIDDLETOWN, RI 02842
MD	BJERRE-PETERSEN, MADS ERIK	KILDEVEJ 28, 2960 RUNGSTED KYST	DENMARK
~~VP~~	~~BURNETT, CHRISTOPHER~~ no longer employed with KVH	~~415 SEA MEADOW DRIVE~~	~~PORTSMOUTH RI 02871~~
T	DESMIT, JOSINA	67 RHODE ISLAND AVE.	NEWPORT RI 02840
VP	DODEZ, JAMES S	10 CEDAR AVE.	MIDDLETOWN RI 02842
CFO	~~FORSYTH, RICHARD C~~ PATRICK SPRATT	~~8 WASHINGTON SQUARE~~ 50 ENTERPRISE CENTER	~~MARBLEHEAD MA 01945~~ MIDDLETOWN, RI 02842

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
C.T. CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. 700008637727 10/28/02--01128--013 **061.25 City / State: FL / Zip Code

CR2E040 (8/02)

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

Signature of Registered Agent: SIGNATURE REQUIRED James A. Bordonaro Assistant Secretary
REGISTERED AGENT MUST SIGN

700008637727
11/20/02--01013--010 **88.75

Date: 12/18/02

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 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: SIGNATURE REQUIRED FINANCE 11/13/02 401-845-8128
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #