

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F99000001446**

1. Corporation Name

RADISYS CORPORATION

Principal Place of Business

5445 NE DAWSON CREEK DRIVE
HILLSBORO OR 97124

Mailing Address

5445 NE DAWSON CREEK DRIVE
ATTN: TAX MANAGER
HILLSBORO OR 97124

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

FILED
03 NOV 10 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT JS

4. Date Incorporated or Qualified
To Do Business in Florida

03/17/1999

5. FEI Number

93-0945232

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PCEO	MYERS, GLENFORD J GROUT, Scott	5445 NE DAWSON CREEK PARKWAY	HILLSBORO OR 97124
CFP	HARPER, JULIA	5445 NE DAWSON CREEK PARKWAY	HILLSBORO OR 97124
COO	DILBECK, RONALD	5445 NE DAWSON CREEK PARKWAY	HILLSBORO OR 97124
T	BRONSON, BRIAN	5445 NE DAWSON CREEK PARKWAY	HILLSBORO OR 97124
S	THOMAS, JOHN Julia Harper	900 SW FIFTH AVENUE, SUITE 2600 5445 NE Dawson Creek	PORTLAND, OR 97204 Hillsboro, OR 97124
D	DALTON, JAMES F Gibson, Scott	5445 NE DAWSON CREEK PKWY.	HILLSBORO OR 97124

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

600024564106
11/10/03--01059--015 **150.00

State
FL

Zip Code

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

Date

REGISTERED AGENT MUST SIGN

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/13/03 (503) 615-1250

CR2E040 (7/03)

RadiSys Corporation
5445 NE Dawson Creek Drive
Hillsboro, OR 97124
(503) 615-1100
(503) 615-1150 fax
www.radisys.com

RadiSys.

November 18, 2003

Ms. Tina Roberts
Florida Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Ms. Roberts:

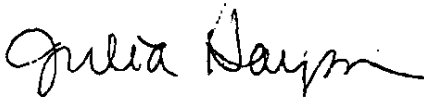
Enclosed please find RadiSys Corporation's completed application of reinstatement and payment of \$150.00 for the annual report filing fee.

We respectfully request that the \$600 reinstatement fee be waived because we did not receive the annual report form or any notices alerting us to the filing due date. In the future, please send the annual report form and any notices to the following address:

RadiSys Corporation
Attn: Amy Miles
5445 NE Dawson Creek Drive
Hillsboro, OR 97124

If you have any questions or need additional information, please do not hesitate to contact me at 503-615-1250.

Best regards,



Julia Harper
Chief Financial Officer

Enclosure