

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
07 OCT 10 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M06000007210

1. Entity Name
DIRECTSAT USA, LLC



07

| | |
|--|--|
| Principal Place of Business 1777 SENTRY PARKWAY WEST, SUITE 302 BLUE BELL, PA 19422-2227 | Mailing Address 1777 SENTRY PARKWAY WEST, SUITE 302 BLUE BELL, PA 19422-2227 |
|--|--|

| | |
|--|---------------------|
| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

| | |
|--------------|--------------|
| City & State | City & State |
| Zip | Country |

10082007 REIN-LLC CR2E101 (1/07)

| | |
|------------------------------------|--|
| 4. FEI Number 20-1673465 | Applied For <input type="checkbox"/> Not Applicable |
|------------------------------------|--|

| | |
|---|--------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |
|---|--------------------------------|

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

7. Name and Address of New Registered Agent

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
City _____ **FL** Zip Code _____

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Carina L. Dunbar* DATE 10/10/07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

| | | |
|--|-----------|---|
| FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$200.00 | BK | Make check payable to Florida Department of State |
|--|-----------|---|

9. MANAGING MEMBERS/MANAGERS

| | | | |
|----------------|--|--|-----------------------------------|
| TITLE | MGR | <input checked="" type="checkbox"/> Delete | NAME KESTENBAUM, JOSEPH |
| STREET ADDRESS | 1777 SENTRY PARKWAY WEST, SUITE 302 | | |
| CITY-ST-ZIP | BLUE BELL, PA 194222227 | | |
| TITLE | | <input type="checkbox"/> Delete | NAME |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> Delete | NAME |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> Delete | NAME |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |

10. ADDITIONS/CHANGES

| | | | |
|----------------|--|--|-----------------------------------|
| TITLE | MGR | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | NAME HISEY, C. SCOTT |
| STREET ADDRESS | 1777 SENTRY PARKWAY WEST, SUITE 302 | | |
| CITY-ST-ZIP | BLUE BELL, PA 19422-2227 | | |
| TITLE | MGR | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | NAME GREGORY K. SWIDELL |
| STREET ADDRESS | 1777 SENTRY PARKWAY WEST, SUITE 302 | | |
| CITY-ST-ZIP | BLUE BELL, PA 19422-2227 | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | NAME |
| STREET ADDRESS | 000110667920 | | |
| CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | NAME |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |

REINSTATEMENT 2007

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Gregory K Swidell* *Gregory K Swidell* DATE 10/10/07 DAYTIME PHONE # 267-464-1720

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE



CORPORATION SERVICE COMPANY

M06000007210

RECEIVED
07 OCT 10 PM 4:08

ACCOUNT NO. : 072100000032

REFERENCE : 266925 7453040

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 150.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ORDER DATE : October 10, 2007

ORDER TIME : 3:31 PM

ORDER NO. : 266925-010

CUSTOMER NO: 7453040

BK

REINSTATEMENT

NAME: DIRECTSAT USA, LLC

FILED
07 OCT 10 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS _____