


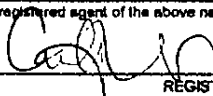
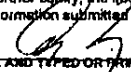
1053

FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

18 JAN 15 AM 8:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>CORPORATION REINSTATEMENT</b> 2002-2016		 <b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT #</b> P98000087422			
1. Corporation Name  CYBEX INTERNATIONAL CORPORATION			
2. Principal Office Address - No P.O. Box # 10 Trotter Drive State, Apt. #, etc. City & State Medway, Massachusetts Zip 02053 Country USA		3. Mailing Office Address  State, Apt. #, etc. City & State  Zip Country	
7. Name and Address of Current Registered Agent Name Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street Suite, Apt. #, Etc. City Tallahassee State FL Zip Code 32301		4. Date Incorporated or Qualified To Do Business in Florida 10/4/2002 5. FEI Number 11-1731581 Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status  400281094254	
8. I, being appointed the registered agent of the above named corporation, am familiar with and consent to the provisions of section 607.0505 or 617.0503, F.S. Signature of Registered Agent  Courtney Williams Asst. Vice President Date 01-15-2016 REGISTERED AGENT MUST SIGN			
9. 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
	See Attached		
10. E-mail Address: ahicks@cybexintl.com (To be used for future annual report notification)			
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., and 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.617.155, F.S. SIGNATURE:  1/15/16 856-354-2200 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

K. ASHTON

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Officers and Directors  
(Block 9 Response – Florida Department of State)

Chairman / Director – John Aglialoro  
10 Trotter Drive  
Medway, Massachusetts 02053

Vice Chair and Secretary / Director – Joan Carter  
10 Trotter Drive  
Medway, Massachusetts 02053

President – Arthur Hicks, Jr.  
10 Trotter Drive  
Medway, Massachusetts 02053

Senior Vice President of R&D – Raymond Giannelli  
10 Trotter Drive  
Medway, Massachusetts 02053

Senior Vice President of Manufacturing – Ed Kurzontkowski  
10 Trotter Drive  
Medway, Massachusetts 02053

Senior Vice President of Sales North America – Ed Pryts  
10 Trotter Drive  
Medway, Massachusetts 02053

Senior Vice President of Sales International – John Young  
10 Trotter Drive  
Medway, Massachusetts 02053

Treasurer and Chief Accounting Officer – Jim Ahearn  
10 Trotter Drive  
Medway, Massachusetts 02053

Assistant Secretary – James Carll, Esq.  
c/o Archer & Greiner, P.C.  
One Centennial Square  
Haddonfield, NJ 08033

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CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 960445 4612432

AUTHORIZATION :

COST LIMIT : \$2,850.00

*[Signature]*

ORDER DATE : January 15, 2016

ORDER TIME : 3:18 PM

ORDER NO. : 960445-010

CUSTOMER NO: 4612432

RECEIVED  
DEPARTMENT OF STATE  
16 JAN 15 PM 4:49

DOMESTIC FILINGS

NAME: CYBEX INTERNATIONAL  
CORPORATION

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - Ext# 62935

EXAMINER'S INITIALS \_\_\_\_\_