Page 1 of 2

FILED

07 MAY -9 AM 5:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F07000002473

1. Corporation Name

Sequoia Voting Systems, Inc.

REINSTATEMENT 06-07

B 5/9/07

CR2E061 (1/07)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
7677 Oakport Street	7677 Oakport Street
Suite, Apt. #, etc.: Suite 800	Suite, Apt. #, etc.: Suite 800
City & State: Oakland, CA	City & State: Oakland, CA
Zip: 94621 Country: USA	Zip: 94621 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: DE 12/20/90

5. FEI Number: 37-1274619 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road

Suite, Apt. #, Etc.:

City: Plantation State: FL Zip Code: 33324

☐ 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 617.0503, F.S.

Signature of Registered Agent: Jennifer Quinn Assistant Secretary Date: 5/9/2007

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
P/D	Jack A. Blaine	7677Oakport Street, Suite 800	Oakland, CA 94621
V/D	Peter McManamy	7677 Oakport Street, Suite 800	Oakland, CA 94621
S/D	Kevin Hurst	1001 Broken Sound Parkway	Boca Raton, FL 33487
D	Antonio Mugica	1001 Broken Sound Parkway	Boca Raton, FL 33487

10. 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 name of individuals listed on this form do not qualify for an exemption contained in Chapter 119, 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: Peter McManamy VP/CFO 05/09/07 510-675-1200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FLH10 - 1/1707 CT System Online

05/09/2007 14:46 8502227615 CT CORP PAGE 02/02

Florida Department of State

Division of Corporations

Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000128162 3)))

H07000128162 3ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5926

CORPORATION REINSTATEMENT

SEQUOIA VOTING SYSTEMS, INC.

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	$908.75

Electronic Filing Menu Corporate Filing Menu Help