

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

10 APR 14 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F04000002486

1. Corporation Name

Ceterus Networks Inc.

600175821766
04/14/10--01046--011 **450.00

REINSTATEMENT

08-10

2. Principal Office Address - No P.O. Box #

507 Airport Blvd.

3. Mailing Office Address

507 Airport Blvd.

Suite, Apt. #, etc.

Bldg. 111

Suite, Apt. #, etc.

Bldg. 111

City & State

Morrisville, NC

City & State

Morrisville, NC

Zip

27560

Country

USA

Zip

28560

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

December 6, 2001

5. FEI Number

75-2967521

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CT Corporation

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

Dale W. Morris

DALE W. MORRIS
ASSISTANT VICE PRESIDENT

Date 4-12-10

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	Jeff Reedy	507 Airport Blvd; Bldg 111	Morrisville, NC 27560
Director	Jeff Reedy	507 Airport Blvd; Bldg 111	Morrisville, NC 27560

10. E-mail Address: arthur.bergens@overturenetworks.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., 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.

SIGNATURE:

Jeff Reedy

Jeff Reedy

919-337-4108

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #