PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

12 JUN 19 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

CR2E081 (11/10)

DOCUMENT # F05000002131

1. Corporation Name
Orbit-CS,INC.

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
716 S. Military Trail	716 S. Military Trail
Suite, Apt. #, etc	Suite, Apt. #, etc.
City & State: Deerfield Beach, FL	City & State: Deerfield Beach, FL
Zip: 33442 Country: USA	Zip: 33442 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 4/6/2005

5. FEI Number: 830405869 ☐ 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: Gordon A. Dieterle, Esquire

Street Address (P.O. Box Number is Not Acceptable): 2101 NW Corporate Boulevard

Suite, Apt. #, Etc: Suite 400

City: Boca Raton State: FL Zip Code: 33431

300236562073
06/19/12--01024--016 **900.00

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: _____ Date: 6/13/12

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
C	Ofer Greenberger	716 S. Military Trail	Deerfield Beach, FL 33442
D	Shmuel Koren	716 S. Military Trail	Deerfield Beach, FL 33442
CEO	Israel Adan	716 S. Military Trail	Deerfield Beach, FL 33442
O/T	Dalit Dadon	716 S. Military Trail	Deerfield Beach, FL 33442
	REINSTATEMENT		

10. **E-mail Address:** dalit.dadon@orbit-cs.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.817.155, F.S.

SIGNATURE: Dalit Dadon 954-742-3831

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

JUN 19 2012

R. HUNT