PLEASE READ ALL INSTRUCTIONS BEFORE C... FILED

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2012 JUN 26 PM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F07000000133

1. Corporation Name
Tangoe, Inc.

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
35 Executive Blvd	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orange, Connecticut	City & State
Zip: 06477 / Country: USA	Zip / Country

CR2E061 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida: 01/09/2007

5. FEI Number: 06-1571143 ☐ 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 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

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: Connie Bagnuso — Date: 06/26/2012
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
Director	Albert R. Subbloie, Jr.	35 Executive Blvd.	Orange, Connecticut 069477
CEO	Albert R. Subbloie, Jr.	35 Executive Blvd.	Orange, Connecticut 069477
CFO	Gary R. Martino	35 Executive Blvd.	Orange, Connecticut 069477
Secretary	Thomas P. Flynn	35 Executive Blvd.	Orange, Connecticut 069477

10. E-mail Address: Michele.Foster@Tangoe.com
(To be used for future annual report notification)

11. I certify that I am an officer or director of 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: Thomas P. Flynn — Thomas P. Flynn — June ___, 2012 — 203.859.9473
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FLR16 - 01/17/2011 CT System Online

6/27

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6384

RE-SUBMIT
Please retain original filing date of submission 6/26

From:
Account Name : C T CORPORATION SYSTEM
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CORPORATION REINSTATEMENT
TANGOE, INC.

Certificate of Status	1
Certified Copy	0
Page Count	02 03
Estimated Charge	$1,358.75

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