PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
15 MAR 18 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000003163

1. Corporation Name

Genesys Telecommunications Laboratories, Inc.

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
2001 Junipero Serra Blvd.		2001 Junipero Serra Blvd.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Daly City, California		Daly City, California	
Zip	Country	Zip	Country
94104	USA	94104	USA

CR2E081. (11/10)

4. Date Incorporated or Qualified To Do Business in Florida
October 11, 1990 (Incorporated)

5. FEI Number
94-3120525
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
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

600270786526

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: Courtney Williams
Asst. Vice President
REGISTERED AGENT MUST SIGN
Date: 03.18.15

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
P/D	Paul Segre	2001 Junipero Serra Blvd.	Daly City, CA 94014
V/D	James Budge	2001 Junipero Serra Blvd.	Daly City, CA 94014
T	Mark Alloy	2001 Junipero Serra Blvd.	Daly City, CA 94014
S/D	James Rene	2001 Junipero Serra Blvd.	Daly City, CA 94014

REINSTATEMENT
2064 2015

10. E-mail Address: tracey.mcallister@genesys.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: _____ 3/2/2015 650-466-1075
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MAR 18 2015

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

ACCOUNT NO. : I20000000195

REFERENCE : 552969 7876922

AUTHORIZATION :

COST LIMIT : $ 2,400.00

ORDER DATE : March 18, 2015

ORDER TIME : 1:24 PM

ORDER NO. : 552969-005

CUSTOMER NO: 7876922

RECEIVED
15 MAR 18 PM 1:55
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
NO ACKNOWLEDGE
SUFFICIENCY OF FILING

REINSTATEMENT

NAME: GENESYS TELECOMMUNICATIONS LABORATORIES, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS _____