APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 JUN 16 AM 9:57
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # F98000005588

1. Corporation Name

RADIANT SYSTEMS, INC.

AMENDMENT 99-60

Principal Place of Business	Mailing Address
107A CORPORATE BLVD, SOUTH PLAINFIELD, NJ 07080	107A CORPORATE BLVD SOUTH PLAINFIELD, NJ 07080

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable	3. New Mailing Office Address, if Applicable
109A CORPORATE BLVD.	109A CORPORATE BLVD.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: South Plainfield NJ	City & State: SOUTH PLAINFIELD, NJ
Zip: 07080 Country: USA	Zip: 07080 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: JULY 28, 1995

5. FEI Number: 223390026 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $8.75 Additional Fee required for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
CP	VENU MYNENI	5 ARROWHEAD LANE, SOMERSET, NJ 08873	SOMERSET, NJ 08873
VV	VINOD KODURU	1 ARROWHEAD LANE	SOMERSET, NJ 08873

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****908.75 ****908.75

8. Name and Address of Current Registered Agent

VINOD J. REDDI
2445 NORTHWEST 49th TERRACE,
COCONUT CREEK, FL 33063

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City | State: FL | Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Vinod J Reddi — REGISTERED AGENT MUST SIGN — Date: 6/14/00

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☑ (See other side for information on intangible tax.)

12. 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 names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), 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.

KE

SIGNATURE: _____ 6/14/2000 Date — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone # 908-668-7080