PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 OCT -8 PM 12:23
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # P02000082162

1. Corporation Name

WiDeFi Corporation

REINSTATEMENT 03

2. Principal Office Address		**3.** Mailing Office Address	
476 A1A		476 A1A	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite 3		Suite 3	
City & State		City & State	
Satellite Beach, FL		Satellite Beach, FL	
Zip	Country	Zip	Country
32937	USA	32937	USA

4. Date Incorporated or Qualified To Do Business in Florida 7/29/2002

5. FEI Number 32-0045484 ☐ 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
James A. Proctor, Jr.

Street Address (P.O. Box Number is Not Acceptable)
300023642113

Suite, Apt. #, Etc.
258 Seaview Street

City	State	Zip Code
Melbourne Beach	FL	32951

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 October 7, 2003

REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

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	James A. Proctor, Jr.	476 A1A, Suite 3	Satellite Beach, FL, 32937
C,D	Kevin Negus	476 A1A, Suite 3	Satellite Beach, FL, 32937
S,D	Kenneth M. Gainey	476 A1A, Suite 3	Satellite Beach, FL, 32937
D	Justin Camp	309 Second Street, Suite 1	Los Altos, CA 94022
D	Dan Rua	2153 Hawthorne Road, Suite 101	Gainesville, FL 32641
D	Andrew Germano	476 A1A, Suite 3	Satellite Beach, FL, 32937

10. 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.

SIGNATURE: _____ October 7, 2003 (321) 777-2085

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

CORPORATION SERVICE COMPANY™

File 1st

ACCOUNT NO. : 072100000032

REFERENCE : 268148 4359274

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 750.00

ORDER DATE : October 3, 2003

ORDER TIME : 9:21 AM

ORDER NO. : 268148-025

CUSTOMER NO: 4359274

CUSTOMER: Mr. Scott Paraker
Pillsbury Winthrop Llp
2550 Hanover Street

Palo Alto, CA 94304-1115

RECEIVED
03 OCT -8 AM 10:50
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: WIDEFI CORPORATION

**********FILE 1ST**********

XX___ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Darlene Ward

EXAMINER'S INITIALS _____