

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
15 DEC 31 PM 5:50

RECEIVED  
FLORIDA

**DOCUMENT #** F11000001721

1. Corporation Name

R & D CIRCUITS, INC.

2. Principal Office Address - No P.O. Box #

3601 SOUTH CLINTON AVENUE

Suite, Apt. #, etc.

City & State

SOUTH PLAINFIELD, NJ

Zip

07080

Country

Middlesex

3. Mailing Office Address

3601 SOUTH CLINTON AVENUE

Suite, Apt. #, etc.

City & State

SOUTH PLAINFIELD, NJ

Zip

07080

Country

Middlesex

CR2E081 (11/10)

4. Date Incorporated or Qualified  
To Do Business in Florida

04/20/2011

5. FEI Number

22-1962894

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED

Yes

\$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

100280530631

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

REGISTERED AGENT MUST ASST. Vice President

Date

12.31.15

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	James Russell	3601 SOUTH CLINTON AVENUE	SOUTH PLAINFIELD, NJ 07080
D	Roger Carolin	3601 SOUTH CLINTON AVENUE	SOUTH PLAINFIELD, NJ 07080
D	Paul McLaughlin	3601 SOUTH CLINTON AVENUE	SOUTH PLAINFIELD, NJ 07080
			<b>S. HAWKES</b>
			JAN 4 AM
			<b>EXAMINED</b>

**REINSTATEMENT**

2012-2015

10. E-mail Address:

(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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/30/2015

Date

Daytime Phone #

file first  
do not separate  
please \*

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

ACCOUNT NO. : I20000000195

REFERENCE : 937514 4354503

AUTHORIZATION :

COST LIMIT : \$ 1,208.75

ORDER DATE : December 30, 2015

ORDER TIME : 11:11 AM

ORDER NO. : 937514-005

CUSTOMER NO: 4354503

REINSTATEMENT

NAME: R & D CIRCUITS, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
           PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS \_\_\_\_\_

RECEIVED  
2015 DEC 31 PM 3:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA