

2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P32950

FILED
May 09, 2013
Secretary of State

Entity Name: ALSTOM SIGNALING INC.

Current Principal Place of Business:

1025 JOHN STREET
WEST HENRIETTA, NY 145869781 US

New Principal Place of Business:

Current Mailing Address:

1025 JOHN STREET
ATTN: ANGELA P. WHITE
WEST HENRIETTA, NY 145869781 US

New Mailing Address:

P.O. BOX 500
WINDSOR, CT 06095 US

FEI Number: 52-1711877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LAUREN KREATZ

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D, P
Name: LUO, XINHONG
Address: 1025 JOHN ST.
City-St-Zip: WEST HENRIETTA,, NY 14586 US

Title: D
Name: MEHIMAN, GUILLAUME
Address: 641 LEXINGTON AVE.
City-St-Zip: NEW YORK, NY 10022 US

Title: P
Name: SCHOEHLER, WILLIAM F
Address: 801 PENNSYLVANIA AVE.
City-St-Zip: WASHINGTON, DC 20004 US

Title: VP S
Name: O'NEILL, ELLEN
Address: 1025 JOHN ST.
City-St-Zip: WEST HENRIETTA, NY 145869781 US

Title: AT
Name: SCE, JOSEPH F
Address: 200 GREAT POND DR.
City-St-Zip: WINDSOR, CT 06095 US

Title: T
Name: MICHAEL, TOLPA J
Address: 200 GREAT POND DR.
City-St-Zip: WINDSOR, CT 06095 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL J. TOLPA

T

05/09/2013

Electronic Signature of Signing Officer or Director

Date