2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F01000004036

Entity Name: INFOTECH SOFTWARE SOLUTIONS, INC.

FILED Aug 21, 2014 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

330 ROBERTS STREET 330 ROBERTS STREET

SUITE 102 SUITE 400

EAST HARTFORD, CT 06108 EAST HARTFORD, CT 06108

Current Mailing Address: New Mailing Address:

330 ROBERTS STREET 330 ROBERTS STREET

SUITE 102 SUITE 400

EAST HARTFORD, CT 06108 EAST HARTFORD, CT 06108

FEI Number: 33-0867496 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY REGISTERED AGENT LEGAL SERVICES, LLC

1201 HAYS STREET 155 OFFICE PLAZA DR.

TALLAHASSEE, FL 323012525 US SUITE A TALLAHASSEE, FL 32301 US

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: MICHAEL ASHLEY 08/21/2014

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: BODANAPU, KRISHNA D

Address: 11 SOFTWARE UNITES LAYOUT, MADHAPUR

City-St-Zip: HYDERABAD-II, AP 500081 IN

Title:

Name: REDDY, ASHOK D

Address: 11 SOFTWARE UNITES LAYOUT, MADHAPUR

City-St-Zip: HYDERABAD-II, AP 500081 IN

Title: D

Name: AGGARWAL, AJAY D

Address: 11 SOFTWARE UNITES LAYOUT, MADHAPUR

City-St-Zip: HYDRABAD-II, AP 20147 IN

Title:

 Name:
 RENARD, JOHN D

 Address:
 12 SOUTH SIDE

 City-St-Zip:
 LONDON, UK W60XY UK

Title: DP

 Name:
 EDWARDS, THOMAS M DP

 Address:
 330 ROBERTS STREET

 City-St-Zip:
 SUITE 400, CT 06108 US

Title: TS

 Name:
 SEN, NILANJAN TS

 Address:
 330 ROBERTS STREET

 City-St-Zip:
 SUITE 400, CT 06108 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: NILANJAN SEN TS 08/21/2014