

2019 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000045911

Entity Name: LEXMOD, INC.**Current Principal Place of Business:**329 WYCKOFF MILLS RD
HIGHTSTOWN, NJ 08520**Current Mailing Address:**329 WYCKOFF MILLS RD
HIGHTSTOWN, NJ 08520 US**FEI Number:** 20-2579677**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROGERS, HARVEY D ESQ.
28 WEST FLAGLER STREET
COURTHOUSE PLAZA - SUITE 500
MIAMI, FL 33130-1891 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:** HARVEY D ROGERS ESQ.**12/20/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PSD
Name	GREISMAN, MENACHEM T
Address	256 SULLIVAN PLACE
City-State-Zip:	BROOKLYN NY 11225

Title	VT
Name	HIRSCH, SCHNEUR Z
Address	561 E NY AVENUE
City-State-Zip:	BROOKLYN NY 11225

Title	COO
Name	MELAMED, ZALMAN M
Address	559 BROOKLYN AVE UNIT 1
City-State-Zip:	BROOKLYN NY 11225

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: MENACHEM GREISMAN

PSD

12/20/2019

Electronic Signature of Signing Officer/Director Detail

Date