

# 2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 692678

**FILED**  
**Dec 01, 2014**  
**Secretary of State**

**Entity Name:** NIAGARA TECHNOLOGY, INC.

**Current Principal Place of Business:**

% FRED H. CUMBIE II  
6000 E BRONSON HWY  
ST. CLOUD, FL 34771

**New Principal Place of Business:**

6000 ALLIGATOR LAKE SHORE WEST  
ST. CLOUD, FL 34771

**Current Mailing Address:**

% FRED H. CUMBIE II  
6000 E BRONSON HWY  
ST. CLOUD, FL 34771

**New Mailing Address:**

6000 ALLIGATOR LAKE SHORE WEST  
ST. CLOUD, FL 34771

**FEI Number:** 59-2116256

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CUMBIE, FRED H, II  
1101 MASSCHUSETTS AVENUE  
ST CLOUD, FL 32769 US

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS COURT SUITE A  
TAMPA, FL 33612 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: CHEYENNE MOSELEY, ASSISTANT SECRETARY

12/01/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: GILMOUR, ALEXANDER  
Address: 6000 ALLIGATOR LAKE SHORE WEST  
City-St-Zip: SAINT CLOUD, FL 34771

Title: S  
Name: GILMOUR, SALLY  
Address: 6000 ALLIGATOR LAKE SHORE WEST  
City-St-Zip: SAINT CLOUD, FL 34771

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: ALEXANDER GILMOUR

P

12/01/2014

Electronic Signature of Signing Officer or Director

Date