

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F09000003845

**FILED**  
**Aug 06, 2014**  
**Secretary of State**

**Entity Name:** MINI-SYSTEMS, INC. OF MASSACHUSETTS

**Current Principal Place of Business:**

20 DAVID ROAD  
NORTH ATTLEBOROUGH, MA 027610069

**New Principal Place of Business:**

**Current Mailing Address:**

20 DAVID ROAD  
PO BOX 69  
NORTH ATTLEBOROUGH, MA 027610069

**New Mailing Address:**

8297 BLAIKIE CT.  
SARASOTA, FL 34240

**FEI Number:** 04-2440008

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RYAN, ELAINE  
1574 D TRAFALGAR LANE  
NAPLES, FL 34116 US

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

AMBLER, LINDSAY  
8297 BLAIKIE CT.  
SARASOTA, FL 34240 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: LINDSAY AMBLER

08/06/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CDPT  
Name: ROBERTSON, GLEN E  
Address: 1304 S ORANGE AVE  
City-St-Zip: SARASOTA, FL 34239

Title: S  
Name: RYAN, ELAINE  
Address: 1574 D TRAFALGAR LN  
City-St-Zip: NAPLES, FL 34116

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: GLEN E ROBERTSON

P

08/06/2014

Electronic Signature of Signing Officer or Director

Date