

2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F94000000025

FILED
Sep 29, 2014
Secretary of State

Entity Name: NOVITEX ENTERPRISE SOLUTIONS, INC.

Current Principal Place of Business:

300 FIRST STAMFORD PLACE 2ND FL WEST
STAMFORD, CT 06902 US

New Principal Place of Business:

Current Mailing Address:

ONE ELMCROFT ROAD, MSC 6101
STAMFORD, CT 06926

New Mailing Address:

300 FIRST STAMFORD PLACE 2ND FL WEST
STAMFORD, CT 06902 US

FEI Number: 13-3587073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DAVID FAIMAN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: HEALY, TIMOTHY
Address: 300 FIRST STAMFORD PLACE, 2ND FL WEST
City-St-Zip: STAMFORD, CT 06926

Title: SECY
Name: FERKO, SHARON
Address: 300 FIRST STAMFORD PLACE, 2ND FL WEST
City-St-Zip: STAMFORD, CT 06902

Title: TREA
Name: RIPOSO, DAVID
Address: 300 FIRST STAMFORD PLACE, 2ND FL WEST
City-St-Zip: STAMFORD, CT 06902

Title: VP
Name: FAIMAN, DAVID
Address: 300 FIRST STAMFORD PLACE, 2ND FL WEST
City-St-Zip: STAMFORD, CT 06902 UN

Title: DIR
Name: VISENTIN, GIOVANNI
Address: 300 FIRST STAMFORD PLACE, 2ND FL WEST
City-St-Zip: STAMFORD, CT 06902

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: DAVID FAIMAN

VP

09/29/2014

Electronic Signature of Signing Officer or Director

Date