

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# K07369

Entity Name: MAIL SORT, INC.

**FILED**  
**Oct 04, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3347 S.W. 7TH STREET  
OCALA, FL 34474 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 536  
OCALA, FL 34478 US

**New Mailing Address:**

FEI Number: 59-2861785

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MERRIAM, III, LAUREN E  
4 SE BROADWAY  
OCALA, FL 34471 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: LAUREN MERRIAM

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: NICHOLS, CARMAN  
Address: 3347 SW 7 STREET  
City-St-Zip: OCALA, FL 34474

Title: D  
Name: NICHOLS, SANDRA H  
Address: 3347 SW 7 STREET  
City-St-Zip: OCALA, FL 34474

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: CARMAN NICHOLS

D

10/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date