

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000010432

**Entity Name:** SCIENCE LOGISTICS CORP.

**FILED**  
**Nov 17, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

8249 NW 66TH STREET  
MIAMI, FL 33166

**New Principal Place of Business:**

8249 NW 66TH STREET  
MIAMI, FL 33166 UN

**Current Mailing Address:**

8249 NW 66TH STREET  
MIAMI, FL 33166

**New Mailing Address:**

**FEI Number:** 26-1848711

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAVALCANTE, HELIO  
9744 NW 57TH TERRACE  
DORAL, FL 33178 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:** ANDREA CAVALCANTE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** VP  
**Name:** CAVALCANTE, HELIO  
**Address:** 9744 NW 57TH TERRACE  
**City-St-Zip:** DORAL, FL 33178

**Title:** S  
**Name:** CAVALCANTE, ANDREA  
**Address:** 9744 NW 57TH TERRACE  
**City-St-Zip:** DORAL, FL 33178

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:** ANDREA CAVALCANTE

OWNE

11/17/2014

Electronic Signature of Signing Officer or Director

Date