2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 149070

Entity Name: BARFIELD, INC.

FILED Sep 21, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4101 N.W. 29TH STREET MIAMI, FL 33142 **Current Mailing Address: New Mailing Address:** 4101 N.W. 29TH STREET MIAMI, FL 33142 FEI Number: 59-0556588 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: ANTHONY LICAUSI, ASST SEC Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: COO () Delete Title: () Change () Addition DENISE, FREDERIC Name: Name: 4101 N W 29TH ST Address: Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip: SV Title: Title: () Delete () Change () Addition Name: AIMARD, LAURENT Name: 4101 NW 29 ST. Address: Address: MIAMI, FL 33142 City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: SV () Delete CFO BUTLER, BENJAMIN A AIMARD, LAURENT Name: Name: 98711 SW 105 COURT 4101 NW 29 ST Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: MIAMI, FL 33142 Title: () Delete Title: () Change () Addition BERNARDO, RAQUEL Name: Name: Address: 4101 NW 29 ST. Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip: Title: sv Title: () Delete () Change () Addition ROGERS, JOHN Name: Name: 7757 NW 25 ST. Address: Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: Title: () Delete Title: () Change () Addition IMPARATO, ANYHONY Name: Name: 4101 NW 29 ST Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33142

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LAURENT AIMARD CFO 09/21/2007