2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000007517

Entity Name: III KINGS INC.

FILED Feb 17, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6612 VERNON ST. 1972 LAKE FOUNTAIN DR

ORLANDO, FL 32818 US **APT 136**

ORLANDO, FL 32839

Current Mailing Address: New Mailing Address:

61 PEARL ST #23 1972 LAKE FOUNTAIN DR

ESSEX JUNCTION, VT 05452 **APT 136**

ORLANDO, FL 32839 US

FEI Number: 37-1451959 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BUTLER, CHRISTANEL 5911 N.W. 16TH ST. OCALA, FL 34482

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: CHRISTANEL BUTLER

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

CEC (X) Change () Addition () Delete CHANDRE, CHANDRE BUTLER-CHANDRE, CHANDRE Name: Name: 6612 VERNON ST Address: 1972 LAKE FOUNTAIN DR APT 136 Address: City-St-Zip: ORLANDO, FL 32818 US City-St-Zip: ORLANDO, FL 32839 US

Title: CEC (X) Delete Title: () Change () Addition

Name: JEAN, ULDRICK R Name: Address: 61 PEARL ST #23 Address: ESSEX JUNCTION, VT 05452 City-St-Zip: City-St-Zip:

Title: CEC (X) Delete Title: () Change () Addition

NIXON, THERON E Name: Name: 530 WINCHESTER PLACE Address: Address: City-St-Zip: COLCHESTER, VT 05446 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHANDRE BUTLER-CHANDRE CEO 02/17/2005