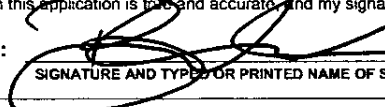


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 04 NOV 24 PM 3:14 SECRETARY OF STATE TALLAHASSEE, FLORIDA 300043219793 12/06/04--01068--004 **750.00	
DOCUMENT # P03000073360					
1. Corporation Name PLANT IT EARTH, INC.					
2. Principal Office Address 2450 South Street		3. Mailing Office Address 5444 Los Palma Vista Drive		REINSTATEMENT 04	
Suite, Apt. #, etc. N/A		Suite, Apt. #, etc. N/A		4. Date Incorporated or Qualified To Do Business in Florida July 2, 2003	
City & State Kissimmee, FL		City & State Orlando, FL		5. FEI Number 20-0069446 ☐ Applied For ☐ Not Applicable	
Zip 34744	Country USA	Zip 32837	Country USA	6. CERTIFICATE OF STATUS DESIRED ☐ \$3.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name Brett Melanson					
Street Address (P.O. Box Number is Not Acceptable) 5444 Los Palma Vista Drive					
Suite, Apt. #, Etc. N/A					
City Orlando			State FL	Zip Code 32837	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent  Date 11/23/2004 REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
D, P, T, S	Brett Melanson	5444 Los Palma Vista Drive		Orlando, FL 32837	
VP	Stephen Blaylock	5451 Los Palma Vista Drive		Orlando, FL 32837	
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
SIGNATURE: 		Brett Melanson, President		11/23/2004 407-702-8204	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	