

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000082990

**FILED**  
**Nov 08, 2010**  
**Secretary of State**

**Entity Name:** DEVERE AND PARTNERS, INC.

**Current Principal Place of Business:**

C/O CARLTON FIELDS, P.A./ANDREW J MARKUS  
100 SE 2 STREET STE 4000  
MIAMI, FL 33131

**New Principal Place of Business:**

C/O CARLTON FIELDS, P.A./ANDREW J MARKUS  
100 SE 2 STREET STE 4200  
MIAMI, FL 33131

**Current Mailing Address:**

C/O CARLTON FIELDS, P.A./ANDREW J MARKUS  
100 SE 2 STREET STE 4000  
MIAMI, FL 33131

**New Mailing Address:**

C/O CARLTON FIELDS, P.A./ANDREW J MARKUS  
100 SE 2 STREET STE 4200  
MIAMI, FL 33131

**FEI Number:** 98-0474981

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CFRA, LLC  
CORPORATE CENTER THREE AT INT'L PLAZA  
4221 W. BOY SCOUT BLVD, 10TH FLOOR  
TAMPA, FL 336075736 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: ANDREW J. MARKUS

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: PRATT, SIMON  
Address: 3003A THE CENTRIUM 30 FLOOR, 60 WYNDHAM ST  
City-St-Zip: HONG KONG, CN CN

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: SIMON PRATT

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

DPST

11/08/2010

\_\_\_\_\_  
Date