PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT OF STATE SECRETARY OF STATE SECRETARY OF STATE DIVISION OF COMPORATIONS DOCUMENT# PO 3000083706 1. Copposition with the control of the secretary of State Original State Orig				
1. Corporation Name Service Solutions, Inc. REINSTATEMENT 2013119582 20 South Brich Rd 20 South Bric	CORPORATION	Secretary of State	2008 JUN 23 AM 7: 50 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
2. Principal Office Address - No P.O. Box # 200 South Brich Rd 200 Sou	DOCUMENT # PO 300	0083706	ZONIDA	
2. Principal Office Address - No P.O. Box # 200 Sorth Birch Rd 200 Sor	Service Soluti	ons, Inc	200131195892	
Sulte. Apt. #, etc. ## 606 City & Statin F. Lauderdale F. F. Lauderdale F. F. Lauderdale F. State Agric State To be Business in Fonda To b			200131195892 06/23/0801052015 **300.00	
City & State F. Lauderdale FL Ft. Lauderdale FL Ft. Lauderdale FL 32 - OSS 025 7 Not Applicable FT 7. Name and Address of Current Registered Agent Name Farrell Gerber 7. Name and Address of Current Registered Agent Name Farrell Gerber Street Address PD. Bigs Number it Not Acceptable) 20 South Birch Circle Status Desired Gerber Street Address PD. Bigs Number it Not Acceptable) 20 South Birch FL Auderdale FL Aggleater of Registered Agent The reinstatement fee is imposed, except in circle with the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived. FL Aggleater of Registered Agent FL Auderdale F. Lauderdale F. Lauderdale F. Redistrered Agent Must Sign Redistrered Agent Must Sign PSTD Farrell T. Gerber 200 South Green Red Beach Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Director Officer and/or Director of City / State / Zip PSTD Farrell T. Gerber 10. Lauderdale, FL 33316 10. Lauderdale, FL	Suite, Apt. #, etc.	Suite, Apt. #, etc.	CR2E081 (12/07)	
Ft. Lauderdale, FL Ft. Lauderdale, FL St. Ft. Lauderdale, FL 33.31 b Country 7. Name and Address of Current Registered Agent Name Farrell Gc/be Streat Address (P. Box Number is Not Acceptable) Susp. Apr. R. Etc. Susp. Apr. R. Etc. Ft. 270 Code CPFT. Lauderdale Ft. State Streat Address of Survey and Address of Current Registered Agent The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived. 8. 1, being appointed the registered agent of the above named corporation, an familiar with and accept the obligations of section 807.0505 or 617.0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 9. Name of Offices and/or Directors Offices and/o			4. Date Incorporated or Qualified To Do Business in Florida 7 31 2003	
7. Name and Address of Current Registered Agent Name Farrell Gerber Street Address, P.O. Box Number s. Not. Acceptable) State \$ 10 Code Street Address, P.O. Box Number s. Not. Acceptable) State \$ 20 Code State \$ 373 Lo State \$ 374 Lo State	Ff. Lauderdale FL	Ft. Lauderdale, FL		
Name Farrell Gerber Street Address (P.O. Box Number is Not Acceptable) 200 South (Sirch) Suite, Apt. #, Etc. # Gove Cirt Laycerdark Signature of Registered Agent (Portica and/or Director (Florida nonprofit corporations must list at least 3 directors) Titles Name of Officers and/or Directors Officer and/or Director (Portica and/or Director (Portica and/or Director) PSTD Farrell T. Gerber 200 South Girch Rd #600 FA. Layderdark, FL 3331k 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 517, F.S. I further certify that when filing this reinstatements of section 807.0401 or 617.0401, F.S., that all fees owed by the encoprotation, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 807.0401 or 617.0401, F.S., that all fees owed by the encopration is typic and accurated and my signature shall have the same legal effect as if made under oath. SIGNATURE:	3331b USA		CERTIFICATE OF STATUS DESIDED 30.73 Additional Fee required	
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		TED NAME OF SIGNING OFFICER OR DIRECTOR		

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June 11, 2008

SERVICE SOLUTIONS, INC. 200 SOUTH BIRCH RD., #606 FT. LAUDERDALE, FL 33316

SUBJECT: SERVICE SOLUTIONS, INC.

Ref. Number: P03000083706

We have received your document for SERVICE SOLUTIONS, INC. and your check(s) totaling \$450.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The total amount due to reinstate without penalty is \$750.00.

There is a balance due of \$300.00 for reinstatement.

The name of the above listed entity is no longer available. Please file an amendment changing the name of this entity. The amendment filing fee is \$35.00.

In order to complete your filings, both the reinstatement application and name change amendment must be submitted together with the applicable fees for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Michelle Milligan Document Specialist Supervisor

Letter Number: 608A00035892

Division of Comparations D.O. DOV COOF Wallaharra Elacida Coof A