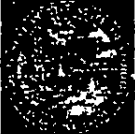


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 13 MAR 07 AM 11:59																									
DOCUMENT # F11000004779																													
1. Corporation Name Elite Financial Services, Inc.																													
2. Principal Office Address - No P.O. Box # 999 Broadway Suite, Apt. #, etc. Suite 200 City & State Saugus, MA Zip 01906 Country USA		3. Mailing Office Address 999 Broadway Suite, Apt. #, etc. Suite 200 City & State Saugus, MA Zip 01906 Country USA		4. Date Incorporated or Qualified To Do Business in Florida 400245467604 03/07/13--01004--011 **750.00 CR28081 (11/10)																									
7. Name and Address of Current Registered Agent Name NRAI Services, Inc. Street Address (P.O. Box Number is Not Acceptable) 515 E. Park Ave. City Tallahassee State FL Zip Code 32301		4. Date Incorporated or Qualified To Do Business in Florida 400245467604 03/07/13--01004--012 **150.00																											
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 NRAI SERVICES, INC. BY: JESSICA COX Jessica Cox, Assistant Secretary Date 12/19/2012 REGISTERED AGENT MUST SIGN																													
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)																													
<table border="1"><thead><tr><th>Titles</th><th>Name of Officers and/or Directors</th><th>Street Address of Each Officer and/or Director</th><th>City / State / Zip</th></tr></thead><tbody><tr><td>Sec.</td><td>Wayne Ahlquist</td><td>999 Broadway, Suite 200</td><td>Saugus, MA 01906</td></tr><tr><td>Pres.</td><td>Jason Voci</td><td>999 Broadway, Suite 200</td><td>Saugus, MA 01906</td></tr><tr><td colspan="4" style="text-align: center;">REINSTATEMENT</td></tr><tr><td colspan="4" style="text-align: right;">MAR 07 2013</td></tr><tr><td colspan="4" style="text-align: right;">R. HUNT</td></tr></tbody></table>						Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	Sec.	Wayne Ahlquist	999 Broadway, Suite 200	Saugus, MA 01906	Pres.	Jason Voci	999 Broadway, Suite 200	Saugus, MA 01906	REINSTATEMENT				MAR 07 2013				R. HUNT			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip																										
Sec.	Wayne Ahlquist	999 Broadway, Suite 200	Saugus, MA 01906																										
Pres.	Jason Voci	999 Broadway, Suite 200	Saugus, MA 01906																										
REINSTATEMENT																													
MAR 07 2013																													
R. HUNT																													
10. E-mail Address: gmo@livedbtfire.net (To be used for future annual report notification)																													
11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. SIGNATURE: Jason Voci Date 12/19/12 Telephone 781-233-9300																													