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: WILEY K GRAYDON, IV

Electronic Signature of Signing Officer/Director Detail

12/15/2017 Date

Electronic Signature of Registered Agent

Officer/Director Detail:

SIGNATURE: WILEY K GRAYDON, IV

Officer/Director Detail :				
	Title	PRESIDENT	Title	EXECUTIVE SECRETARY
	Name	GRAYDON, IV, WILEY K DR.	Name	GRAYDON, WILSONJA M
	Address	PO BOX 1821	Address	PO BOX 1821
	City-State-Zip:	MINNEOLA FL 34755	City-State-Zip:	MINNEOLA FL 34755
	Title	DIRECTOR	Title	DIRECTOR
	Name	GRAYDON, V, WILEY A	Name	GRAYDON, WASEME N
	Address	PO BOX 1821	Address	PO BOX 1821
	City-State-Zip:	MINNEOLA FL 34755	City-State-Zip:	MINNEOLA FL 34755

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.

Name and Address of Current Registered Agent:

GRAYDON, IV, WILEY K DR. 4129 UNITED AVENUE SUITE NORTH MOUNT DORA, FL 32757 US

MINNEOLA, FL 34755 US

Current Mailing Address: PO BOX 1821

4129 UNITED AVENUE

FEI Number: 82-3715304

2017 FLORIDA PROFIT CORPORATION REINSTATEMENT DOCUMENT# P12000038623

Entity Name: GRAY ELEPHANT CORPORATION

Current Principal Place of Business:

FILED Dec 15, 2017

Secretary of State

CR4518540201

Certificate of Status Desired: Yes

12/15/2017 Date