

2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F01000004205

Entity Name: HELICONIA 2K, INC.

FILED
May 30, 2013
Secretary of State

Current Principal Place of Business:

C/O MICHAEL J BODAH CPA 2443 PINE WOOD CR
NAPLES, FL 34105

New Principal Place of Business:

Current Mailing Address:

C/O MICHAEL J BODAH CPA 2443 PINE WOOD CR
NAPLES, FL 34105

New Mailing Address:

FEI Number: 80-0033074

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BODAH, MICHAEL CPA
2443 PINWOOD CIRCLE,
NAPLES, FL 34105 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: MICHAEL J BODAH CPA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CP
Name: KIMBERLY WILLIAM DURLING
Address: 2 LAPWING CLOSE, SELSDON VALE
City-St-Zip: S. CROYDEN, SURREY, EN CR2 UK

Title: DR
Name: CORLISS, JAMES
Address: 104-210 TIMBER LAKE CIRCLE
City-St-Zip: NAPLES, FL 34104 US

Title: DR
Name: DURLING, COLLEEN
Address: 2 LAPWING CLOSE, SELSDON VALE
City-St-Zip: S. CROYDEN, SURREY, EN CR2 8TD UK

Title: TRES
Name: DURLING, MANUELA
Address: 955 MARINE DRIVE, APT 1601
City-St-Zip: WEST VANCOUVER, BC V7T 1A9 CA

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: MANUELLA DURLING

TREA

05/30/2013

Electronic Signature of Signing Officer or Director

Date