2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000004093

Entity Name: ALLIED SERVICES GROUP, INC.

FILED Oct 11, 2005 Secretary of State

210 S. WEST STREET 6730 ROOSEVELT AVE LEBANON, OH 45036

SUITE 400

FRANKLIN, OH 45005

Current Mailing Address: New Mailing Address:

210 S. WEST STREET 6730 ROOSEVELT AVE LEBANON, OH 45036 FRANKLIN, OH 45005

FEI Number: 31-1599147 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DOTSON, FREDRICK PAGE, ANDY 1345 INDÚSTRIAL PARK ROAD

5000 ÓLD ST RD 37 MULBERRY, FL 33860 ATTN: ALLIED SERVICES GROUP MULBERRY, FL 33860 US

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: ANDY PAGE 10/11/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition EPPERSON, JEFFREY J EPPERSON, JEFFREY J Name: Name: 1424 N. PENINSULA BLVD. 1424 N. PENINSULA BLVD. Address: Address: City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: Title: () Change () Addition () Delete

LANGHORNE, JOHN Name: Name: 1609 N. MARSHALL ROAD Address: Address: MIDDLETOWN, OH 45042 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition

HOGAN, MICHAEL G Name: Name: 21 EASTWOOD STREET Address: Address: City-St-Zip: SOUTHHAMPTON, MA 01073 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

SCHULTZ, JOHN SCHULTZ, JOHN Name: Name: Address: 4796 N. ST. RT. 59 Address: 4796 N. ST. RT. 59 City-St-Zip: City-St-Zip: BRAZIL, IN 47834 BRAZIL, IN 47834

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

VΡ SIGNATURE: JOHN L LANGHORNE 10/11/2005