2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000000760

Entity Name: LARMCO ENTERPRISES, INC.

3716 COLONIAL AVE. SW

ROANOKE, VA 24018

Address:

City-St-Zip:

FILED Apr 01, 2008 Secretary of State

Entity Nai	me: LARMO	DENTERPRISES, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3716 COLONIAL AVE. SW ROANOKE, VA 24018				166 THORNTON DRIVE PALM BEACH GARDENS, FL 33418	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
3716 COLONIAL AVE. SW ROANOKE, VA 24018				166 THORNTON DRIVE PALM BEACH GARDENS, FL 33418	
FEI Number	: 54-1662053	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
166 THOR	GRAHAM C RNTON DR ACH GARDEN	NS, FL 33418 US			
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE: GRAHAI	M C LARMER			
	Electro	nic Signature of Registered Ag	jent	Date	
		93(2)(b), F.S., the corporation did n ng Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LARMER, HAF 166 THORNTO		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LARMER, GRA 166 THORNTO		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (HARRELL, GF) Delete EGORY V	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: GRAHAM C LARMER DST 04/01/2008