## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F04000000760

City-St-Zip:

ROANOKE, VA 24018

Entity Name: LARMCO ENTERPRISES, INC.

FILED Oct 01, 2009 Secretary of State

		ENTERN MOLO, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
7711 N M ILITARY TRAIL, STE 1004 PALM BEACH GARDENS, FL 33410				7711 N MILITARY TRAIL, STE 1004 PALM BEACH GARDENS, FL 33410	
Current M	ailing Addres	ss:	New Mailing Addres	New Mailing Address:	
7711 N M ILITARY TRAIL, STE 1004 PALM BEACH GARDENS, FL 33410			7711 N MILITARY TR. PALM BEACH GARD	7711 N MILITARY TRAIL, STE 1004 PALM BEACH GARDENS, FL 33410	
FEI Number:	54-1662053	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
166 THOR	GRAHAM C NTON DR CH GARDEN	S, FL 33418 US			
The above in the State	named entity : of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE: GRAHAN	1 C LARMER			
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no g 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, HAR		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: Address:	D ( ) HARRELL, GRI 3716 COLONIA		Title: Name: Address:	( ) 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.

City-St-Zip:

SIGNATURE: GRAHAM LARMER DST 10/01/2009