

To: +1 (850) 205-0384
Subject:

From: Patricia Tadlock

Thursday, March 16, 2006 5:03 PM Page: 2 of 2

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2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F04000004358			
1. Entity Name NERDS ON SITE, INC			
Principal Place of Business 619 FAIRWAY DRIVE ROYAL OAK, MI 48073		Mailing Address 619 FAIRWAY DRIVE ROYAL OAK, MI 48073	
2. Principal Place of Business 300 RIVER PLACE Suite, Apt. #, etc. 3000 City & State DETROIT Zip 48207		3. Mailing Address 300 RIVER PLACE Suite, Apt. #, etc. 3000 City & State DETROIT Zip 48207 Country USA	
4. FEI Number 36-4526020		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR. SUITE 4 WESTON, FL 33331		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with: and except the obligations of registered agent.			
SIGNATURE <i>[Signature]</i> Date 3/16/06		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
FILE NOW!!! FEE IS \$300.00			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
DP REGAN, CHARLES 300 RIVER PLACE, SUITE 3000 DETROIT, MI 48207		[] Change [] Addition	
DS REDEKOP, DAVID 300 RIVER PLACE, SUITE 3000 DETROIT, MI 48207		[] Change [] Addition	
DT HARBARENKO, JOHN 300 RIVER PLACE, SUITE 3000 DETROIT, MI 48207		[] Change [] Addition	
[] Change [] Addition		[] Change [] Addition	
[] Change [] Addition		[] Change [] Addition	
[] Change [] Addition		[] Change [] Addition	
[] Change [] Addition		[] Change [] Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signatures 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 in Block 10 or Block 11 if changed or on an attachment with an address with all other like empowered.			
SIGNATURE: <i>[Signature]</i> LORELEE WETZLAUFER Date 3/16		519 963 2965	

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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

0928.49480

CORPORATION REINSTATEMENT

NERDS ON SITE, INC.

Certificate of Status	0
Certified Copy	0
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\$300

Please waive \$600

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Corporate Filing Menu

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