2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000006464

TOOMBS, BOB

DALLAS, TX 75201

100 CRESCENT COURT, SUITE 1200

Name:

Address:

City-St-Zip:

Entity Name: GLADES HOLDINGS CORPORATION

FILED Oct 12, 2009 Secretary of State

| Current Principal Place of Business: | | | New Principal Pl | New Principal Place of Business: | |
|--|---------------------------------|--|---|--|--|
| 817 W. PEACHTREE ST NW 750 ATLANTA, GA 30308 | | | SUITE 750 | 817 W. PEACHTREE ST NW SUITE 750 ATLANTA, GA 30308 | |
| Current Mailing Address: | | | New Mailing Add | New Mailing Address: | |
| 817 W. PEACHTREE ST NW 750 ATLANTA, GA 30308 | | | SUITE 750 | 817 W. PEACHTREE ST NW SUITE 750 ATLANTA, GA 30308 | |
| FEI Number | : 20-3609112 | FEI Number Applied For () | FEI Number Not Applicable (|) Certificate of Status Desired (X) | |
| Name and Address of Current Registered Agent: | | | Name and Addre | Name and Address of New Registered Agent: | |
| 350 E. LAS SUITE 100 FT. LAUDI | ERDALE, FL | 33301 US | nurnana of changing its regio | torod office or registered agent or both | |
| | e named entity e of Florida. | submits this statement for the | purpose of changing its regis | tered office or registered agent, or both, | |
| SIGNATU | RE: JAMES S | | | | |
| | Electro | nic Signature of Registered Ag | ent | Date | |
| | | 93(2)(b), F.S., the corporation did n g Trust Fund Contribution (). | ot receive the prior notice. | | |
| | S AND DIREC | | ADDITIONS/CHA | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | |
| Title: Name: Address: City-St-Zip: | ARMES, JOSE | IT COURT, SUITE 1200 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | DODD, WILLIA | HTREE ST NW #750 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | HICKEY, STEV | HTREE ST NW #750 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: | VP (|) Delete | Title: | () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES SHAW TM 10/12/2009