

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000001882

Entity Name: LOW.COM, INC.

FILED
Oct 08, 2007
Secretary of State

Current Principal Place of Business:

818 W 7TH STREET STE 700
LOS ANGELES, CA 90017

New Principal Place of Business:

515 S. FLOWER STREET, 44TH FLOOR
LOS ANGELES, CA 90071

Current Mailing Address:

818 W 7TH STREET STE 700
LOS ANGELES, CA 90017

New Mailing Address:

515 S. FLOWER STREET, 44TH FLOOR
LOS ANGELES, CA 90071

FEI Number: 20-2490231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE STE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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: D. E. HOWARTH

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NG, LAWRENCE
Address: 818 W 7TH STREET STE 700
City-St-Zip: LOS ANGELES, CA 90017

Title: DP (X) Delete
Name: HSU, FRED
Address: 818 W 7TH STREET STE 700
City-St-Zip: LOS ANGELES, CA 90017

Title: VP (X) Delete
Name: AIDUN, SAM
Address: 818 W 7TH STREET STE 700
City-St-Zip: LOS ANGELES, CA 90017

Title: S (X) Delete
Name: HSU, BETTY
Address: 818 W 7TH STREET STE 700
City-St-Zip: LOS ANGELES, CA 90017

Title: T (X) Delete
Name: LABBETI, JOHN
Address: 818 W 7TH STREET STE 700
City-St-Zip: LOS ANGELES, CA 90017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NG, LAWRENCE
Address: 515 S. FLOWER STREET, 44TH FLOOR
City-St-Zip: LOS ANGELES, CA 90071

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: JOSH ARMSTRONG

GC

10/08/2007

Electronic Signature of Signing Officer or Director

Date