

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000006427

FILED
Jun 27, 2008
Secretary of State

Entity Name: LUCKYCLOVER, INC.

Current Principal Place of Business:

39225 GRAND RIVER AVE
FARMINGTON HILLS, MI 48335

New Principal Place of Business:

37788 HILLS TECH DR
FARMINGTON HILLS, MI 48331

Current Mailing Address:

39225 GRAND RIVER AVE
FARMINGTON HILLS, MI 48335

New Mailing Address:

37788 HILLS TECH
FARMINGTON HILLS, MI 48331

FEI Number: 37-1462808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCorp SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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: CHRISTOPHER JOHLFS

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: CP () Delete
Name: HESSE, NATALIE
Address: 39225 GRAND RIVER AVE
City-St-Zip: FARMINGTON HILLS, MI 48335

Title: DST () Delete
Name: HESSE, KURT
Address: 39225 GRAND RIVER AVE
City-St-Zip: FARMINGTON HILLS, MI 48335

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: HESSE, NATALIE
Address: 37788 HILLS TECH
City-St-Zip: FARMINGTON HILLS, MI 48331

Title: DST (X) Change () Addition
Name: HESSE, KURT
Address: 37788 HILLS TECH
City-St-Zip: FARMINGTON HILLS, MI 48331

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: TIMOTHY DYE

CPA

06/27/2008

Electronic Signature of Signing Officer or Director

Date