2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000006664

Address:

City-St-Zip:

FILED Apr 15, 2009 Secretary of State

Entity Nar	ne: IMAGINO	FECHNOLOGY GROUP, INC	•			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
N63 W230 SUSSEX, V	75 HIGHWAY WI 53089	74				
Current Mailing Address:			New Mailing Address:			
N63 W230 SUSSEX, V	75 HIGHWAY WI 53089	74				
FEI Number:	39-2002251	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and	Address of N	lew Registered Agent:	
		CDRIVE, SUITE 4 US				
	named entity of Florida.	submits this statement for the p	ourpose of changing i	ts registered o	office or registered agent, or	both,
SIGNATUR	RE: TONY AI	LEXANDER				
	Electro	nic Signature of Registered Age	ent		Date	
		93(2)(b), F.S., the corporation did no ng Trust Fund Contribution ().	t receive the prior notic	e.		
OFFICERS	S AND DIREC	CTORS:	ADDITION	S/CHANGES	TO OFFICERS AND DIRE	CTORS:
Title: Name: Address: City-St-Zip:	DP (QUADRACCI, N63 W23075 I SUSSEX, WI	HIGHWAY 74	Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	VPT (FOWLER, JOH N63 W23075 H SUSSEX, WI	HIGHWAY 74	Title: Name: Address: City-St-Zip:	VP (X FOWLER, JOH N63 W23075 H SUSSEX, WI 5	IIGHWAY 74	
Title: Name: Address: City-St-Zip:	S (SCHIESL, AND N63 W23075 H SUSSEX, WI	HIGHWAY 74	Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name:	() Delete	Title: Name:	T () VANDERBOOM) Change (X) Addition 1, KELLY A	

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.

Address:

City-St-Zip:

SIGNATURE: ANDREW R. SCHIESL SECY 04/15/2009

N63 W23075 HIGHWAY 74

SUSSEX, WI 53089