2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 20, 2009
Secretary of State

DOCUMENT# F06000006935

Entity Name: L M N PRINTING COMPANY, INC.

Current Principal Place of Business:

23 WEST MERRICK ROAD
VALLEY STREAM, NY 11580

New Principal Place of Business:

Current Mailing Address:

23 WEST MERRICK ROAD
VALLEY STREAM, NY 11580

New Mailing Address:

FEI Number: 11-2284235 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMALFITANO, NANETTE
118 NORTH RIDGEWAY AVE
EDGEWATER, FL 32132 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: NANETTE AMALFITANO
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: PRES ( ) Delete
Name: AMALFITANO, NANETTE
Address: 118 NORTH RIDGE WOOD AVE
City-St-Zip: EDGEWATER, FL 32132

Title: VP ( ) Delete
Name: CARRO, NOREEN
Address: 23 WEST MERRICK ROAD
City-St-Zip: VALLEY STREAM, NY 11580

Title: VP ( ) Delete
Name: ALY, NORA C
Address: 118 NORTH RIDGEWOOD AVE
City-St-Zip: EDGEWATER, FL 32132

Title: S ( ) Delete
Name: ALY, NORA C
Address: 118 NORTH RIDGEWOOD AVE
City-St-Zip: EDGEWATER, FL 32132

Title: DT ( ) Delete
Name: CARRO, MARY
Address: 118 NORTH RIDGEWOOD AVE
City-St-Zip: EDGEWATER, FL 32132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: NANETTE AMALFITANO PRES 10/20/2009
Electronic Signature of Signing Officer or Director — Date