2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F07000004154

FILED Nov 05, 2008 Secretary of State

Entity Nar	ne: ANGELS	IN THE WINGS, INC.					
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:			
	AINO DRIVE 8GH, PA 15220)	SUITE 248	27499 RIVERVIEW CENTER BLVD SUITE 248 BONITA SPRINGS, FL 34134			
Current M	ailing Addres	s:	New Maili	New Mailing Address:			
	AINO DRIVE 8GH, PA 15220)	SUITE 248	ERVIEW CEN PRINGS, FL			
FEI Number:	01-0888402	FEI Number Applied For ()	FEI Number Not Appl	licable()	Certificate of Status Desire	ed ()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
3133 GRE	AK, THOMAS <i>F</i> ENFLOWER C PRINGS, FL 3	OURT					
The above in the State	named entity s of Florida.	submits this statement for the p	urpose of changing i	ts registered	office or registered agent	, or both,	
SIGNATUR	RE: THOMAS	A. BERNACIAK					
	Electron	ic Signature of Registered Age	ent	Date			
		3(2)(b), F.S., the corporation did no Trust Fund Contribution ().	t receive the prior notic	e.			
	S AND DIREC	•	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CP () WEST, TERRI L 3133 GREENFL BONITA SPRING	OWER CT.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DAVIS, KAREN	Delete O WAY, UNIT 101 GS, FL 34135	Title: Name: Address: City-St-Zip:	BERNACIAK, 3133 GREENF	X) Change () Addition THOMAS FLOWER COURT NGS, FL 34134		
Title: Name: Address: City-St-Zip:	DS () HANST, NANCY 292 STATE RO VALENCIA, PA	AD D	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name:	T () BERNACIAK, TH	Delete HOMAS A	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: TERRI L. WEST CP 11/05/2008

3133 GREENFLOWER COURT

BONITA SPRINGS, FL 34134

Address:

City-St-Zip: