2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 19, 2009
Secretary of State

DOCUMENT# F96000004651

Entity Name: JOY-MARK, INC.

Current Principal Place of Business:

2121 E. NORSE AVE.
CUDAHY, WI 53110

New Principal Place of Business:

Current Mailing Address:

2121 E. NORSE AVE.
CUDAHY, WI 53110

New Mailing Address:

FEI Number: 39-1287057 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOVEJOY, J S
27153 OAKWOOD LAKE DR., #H102
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

LOVEJOY, JAMES S
27153 OAKWOOD LAKE DR., #H102
BONITA SPRINGS, FL 34134 US

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: JAMES S LOVEJOY 10/19/2009
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: PD ( ) Delete
Name: LOVEJOY, BRENT
Address: 2918 OBSERVATORY AVE #3
City-St-Zip: CINCINNATI, OH 45208

Title: D ( ) Delete
Name: LOVEJOY, SPENCER J
Address: 27153 OAKWOOD LAKE DRIVE #H102
City-St-Zip: BONITA SPRINGS, FL 34134

Title: V ( ) Delete
Name: LOVEJOY, ERIC
Address: 1306 HERLIN PLACE
City-St-Zip: CINCINNATI, OH 45208

Title: ST ( ) Delete
Name: LIPNIK, JILL & MIKE
Address: 5241 N. DELAWARE STREET
City-St-Zip: INDIANAPOLIS, IN 46220

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: LOVEJOY, JAMES S
Address: 27153 OAKWOOD LAKE DRIVE #H102
City-St-Zip: BONITA SPRINGS, FL 34134

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: CANDICE MEYER-VENNE ACCT 10/19/2009
Electronic Signature of Signing Officer or Director Date