2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G60115

Entity Name: SOUTHDALE, INC.

FILED Oct 08, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

4277 EXCHANGE AVENUE

Current Mailing Address:

SUITE 3

NAPLES, FL 34104

New Mailing Address:

63 THORNCREST LANE NAPLES, FL 34113

4277 EXCHANGE AVENUE 63 THORNCREST LANE SUITE 3 NAPLES, FL 34113 US

NAPLES, FL 34104 FEI Number: 65-0005208

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

OLAH, EDWARD L 63 THORNCREST LANE NAPLES, FL 34113 US

NAPLES-LAWDOCK, INC. 1395 PANTHER LANE

SUITE 300 NAPLES, FL 34104 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: EDWARD L. OLAH 10/08/2009

Electronic Signature of Registered Agent

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

FEI Number Applied For ()

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: P,D () Delete

Name: OLAH, JANE E

Address: 4277 EXCHANGE AVENUE, SUITE 3

City-St-Zip: NAPLES, FL 34104

Title: VP,D () Delete Name: OLAH, EDWARD

Address: 4277 EXCHANGE AVENUE, SUITE 3

City-St-Zip: NAPLES, FL 34104

Title: () Delete

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

Name: OLAH, JANE E Address: P O BOX 551

City-St-Zip: NAPLES, FL 34106 05

 $\label{eq:title:VPD} \mbox{Title:} \qquad \mbox{VP,D} \qquad \mbox{(X) Change () Addition}$

Name: OLAH, EDWARD M Address: P O BOX 551

City-St-Zip: NAPLES, FL 34106 05

Title: P () Change (X) Addition

 Name:
 OLAH, EDWARD L

 Address:
 P O BOX 551

 City-St-Zip:
 NAPLES, FL 34106 05

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: EDWARD L. OLAH P 10/08/2009