2008 FOR PROFIT CORPORATION

	MITITYALIN	EPONI (AI	n,					
DOCU 1. Entity Narr	MENT # <b>J80377</b>	-	<b>,</b> 1 ,			FILED		
FLAMBOROUGH GROUP, INC.					HIS	08 DEC 30 PM	2: 16	
Principal Plac	e of Business	Mailing Address						
18120 SAN CARLOS BOULEVARD SUITE 1101 FORT MYERS FL 33931 US		59 KIRBY AVENUE, UNIT 2 DUNDAS, ONTARIO CANADA L9H 6P3 XX		SECRETARY OF STATE TALLAHASSEE FLORIDS				
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address					37377 37377 31311 313	~
Suite, Apt. #, etc.		Suite, Apt. #, etc.		REIN	STATEM	ENT	80	
City & State		City & State		4. FEI Numb	65-0087452	<del></del>	oplied For of Applicable	
Zıp	Country	Zip L	Count	lry		ertificate of Status Desired 🔀 \$8.75 Additional Fee Required		
	6. Name and Address of Current I	Registered Agent		Name	7. Name an	d Address of New Registered	Agent	
KYLE, KEVIN A 1380 ROYAL PALM SQUARE BOULEVARD FORT MYERS FL 33919				Street Address (P.O. Box Number is Not Acceptable)				
101	WILLIOTE 33313	A		City 1	· v	FL	Zip Code	e
The above named entity submits this statement to the purpose of changing its registered.				d office or regist				
8. 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. I am familiar with, and accept the obligations of registered agent.								
Signature typed or printed name of registered agent and indication (NOTE, Registered Agent signature required when reinstating)								
FILE NOW!!! FEE IS \$550.00  S.607.193(2)(b), F.S. allows for the waiver of late fee. By checking this box, the corporatio did not receive prior notice. Fee to file is \$16					ation certifies it	Election Campaign Financ     Trust Fund Contribution.		00 May Be ed to Fees
10.	OFFICERS AND (	DIRECTORS	11.		ADDITIONS	/CHANGES TO OFFICERS AND	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VOORTMAN, BERNIE 59 KIRBY AVENUE, UNIT 2 DUNDAS, ONTARIO, CAN, L9H6P3	□ Delete			11710	001377934 /0801059003	□ Change <b>1</b> :2 **550. []	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VOORTMAN, CALVIN 59 KIRBY AVENUE, UNIT 2 DUNDAS, ONTARIO, CAN, L9H6P3	☐ Delete		- 1	1271	<del>)01:3095555</del> /0801023005 •	□ Change ■ 3 • * 208. 79	Addition
NAME STREET ADDRESS CITY-ST-ZIP	P VOORTMAN, WILLIAM 59 KIRBY AVENUE, UNIT 2 DUNDAS, ONTARIO, CAN, L9H6P3	∵ ∐ Delete		T ADDRESS SI-ZIP	,		<u></u> Changé	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DAWAARD, JOHN 59 KIRBY AVENUE, UNIT 2 DUNDAS, ONTARIO, CAN, L9H6P3	☐ Delete		T ADDRESS ST-ZIP			Change	Addition
STREET ADDRESS	ST HUTTEN, TRISH 59 KIRBY AVENUE, UNIT 2 DUNDAS, ONTARIO, CAN, L9H6P3	☐ Delete		T ADDRESS ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREE	I ADDRESS			☐ Change	Addition
CITY-ST-ZIP  12. I hereby o	pertify that the information supplied with	this filling does not qualify	CITY-	ST-ZIP emptions contain	ned in Chapter 1	19, Florida Statutes I further cel	tify that the i	nformation
indicated	on this report or supplemental report is poration or the receiver or trustee empor	true and accurate and that	l my signati	ure shall have the	e same legal effe	ot as if made under oath: that I a	ım an officer	or director

changed, or on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE: John DEWAARD Oct 31 2008 (905) 628
SIGNATURE TO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Prome #