

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# L06024

**FILED**  
**Oct 11, 2011**  
**Secretary of State**

**Entity Name:** VON HAWK RESTORATION LABORATORIES, INC.

**Current Principal Place of Business:**

24987 COUNTY RD 42  
PAISLEY, FL 32767

**New Principal Place of Business:**

**Current Mailing Address:**

24987 COUNTY RD 42  
P.O. BOX 546  
PAISLEY, FL 32767

**New Mailing Address:**

**FEI Number:** 59-2971299

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VON HAWK, ALEXANDRA M.  
24987 COUNTY RD 42  
PAISLEY, FL 32767 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:** ALEXANDRA VONHAWK

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** VON HAWK, ALEXANDRA M.  
**Address:** 24987 COUNTY RD 42  
**City-St-Zip:** PAISLEY, FL

**Title:** D  
**Name:** GLASS, SUSAN B  
**Address:** 100 LACOSTA LANE, SUITE 140  
**City-St-Zip:** DAYTONA BEACH, FL 32114

I hereby 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 all other like empowered.

**SIGNATURE:** ALEXANDRA VONHAWK

D

10/11/2011

Electronic Signature of Signing Officer or Director

Date