2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000124952

Entity Name: WOLF NOVELTIES, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
224 WEST CENTRAL PARKWAY SUITE 1020 ALTAMONTE SPRINGS, FL 32714 US	

Current Mailing Address:	**New Mailing Address:**
915 DOYLE ROAD SUITE 303 - BOX 107 DELTONA, FL 32725 US	

FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable ( )	Certificate of Status Desired (X)

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
ARTHUR GRAHAM 444 SEABREEZE BLVD SUITE 1001 DAYTONA BEACH, FL 32118 US	PHELPS, DAVID CHRMAN 1516 FORT SMITH BLVD DELTONA, FL 32725 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: DAVID PHELPS   11/21/2011
                    Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM
Name:	DYNAMIX PRODUCT DEVELOPMENT & MARKETING GR
Address:	915 DOYLE ROAD - SUITE 303 - BOX107
City-St-Zip:	DELTONA, FL 32725 US

Title:	MGRM
Name:	DRAKE, DOUGLAS PRS/CEO
Address:	915 DOYLE ROAD - SUITE 303 - BOX 107
City-St-Zip:	DELTONA, FL 32725

Title:	MGR
Name:	PHELPS, DAVID CHRMAN
Address:	915 DOYLE ROAD - SUITE 303 - BOX 107
City-St-Zip:	DELTONA, FL 32725

Title:	MGRM
Name:	JONES, MICHAEL & RUTH PARTNER
Address:	915 DOYLE ROAD - SUITE 303 - BOX107
City-St-Zip:	DELTONA, FL 32725

Title:	MGRM
Name:	FORTES, JOEY & JOHN PARTNER
Address:	915 DOYLE ROAD - SUITE 303 - BOX 107
City-St-Zip:	DELTONA, FL 32725

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: DAVID PHELPS - CHAIRMAN   MGR   11/21/2011
            Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date