2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# M05450

Entity Name: CNW CORPORATION, INC.

FILED Oct 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6125 MIAMI LAKES DRIVE EAST 6125 MIAMI LAKES DR EAST MIAMI LAKES, FL 33014 MIAMI LAKES, FL 33014

Current Mailing Address: New Mailing Address:

6125 MIAMI LAKES DRIVE EAST 19715 WEST LAKE DR MIAMI LAKES, FL 33014 MIAMI, FL 330152250

FEI Number: 59-2448829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NESMITH, RICHARD CULLEN, JOHN T 6125 MIAMI LAKES DRIVE EAST 12401 ORANGE DR MIAMI LAKES, FL 33014 DAVIE, FL 33330 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: JOHN T CULLEN 10/01/2008

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

NESMITH, RICHARD, NESMITH, RICHARD, Name: Name: 6125 MIAMI LAKES DRIVE EAST Address: 19715 WEST LAKE DR Address: City-St-Zip: MIAMI LAKES, FL 33014 City-St-Zip: MIAMI LAKES, FL 330152250

Title: Title: VΡ (X) Change () Addition () Delete

NESMITH, SHARON Name: Name: NESMITH, SHARON 6125 MIAMI LAKES DRIVE EAST Address: 19715 WEST LAKE DR Address: MIAMI LAKES, FL 33014 MIAMI, FL 33015 City-St-Zip: 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.

VΡ SIGNATURE: SHARON NESMITH 10/01/2008