2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N12000003054

FILED Nov 05, 2014 Secretary of State

Entity Name: INTERNATIONAL RECOVERY MANAGEMENT, INC.

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

100 LINCOLN ROAD PH6 1050 HILLSBORO MILE #808W MIAMI BEACH, FL 33139 US HILLSBORO BCH, FL 33062 US

Current Mailing Address: New Mailing Address:

13435 S.MCCALL RD BOX 394 PORT CHARLOTTE, FL 33981

FEI Number: 45-4834562 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:

NACHTWEY, KIMBERLY D
13639 ALLAMAND CIRCLE
PORT CHARLOTTE, FL 33981 US

NACHTWEY, KIMBERLY D
13639 ALLAMANDA CIRCLE
PORT CHARLOTTE, FL 33981 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: KIMBERLY D. NACHTWEY 11/05/2014

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: HOSKINS, DAVID

Address: 1050 HILLSBORO MILE #808W City-St-Zip: HILLSBORO BCH, FL 33062 US

Title: D

Name: HOKSINS, STUART

Address: 1050 HILLSBORO MILE #808W City-St-Zip: HILLSBORO BCH, FL 33062 US

Title: STD

Name: NACHTWEY, KIMBERLY D Address: 13639 ALLAMANDA CIR

City-St-Zip: PORT CHARLOTTE, FL 33981 US

Title: [

Name: BENZIO, KARL

Address: 108 RIDGE VIEW LANE
City-St-Zip: DOYLESTOWN, PA 18901 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KIMBERLY D. NACHTWEY STD 11/05/2014