2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000101796

Entity Name: PHILLIP GRAMOLINI INC.

FILED Oct 23, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

27230 MAYFAIR CT BONITA SPRINGS, FL 34135

Current Mailing Address: New Mailing Address:

27230 MAYFAIR CT 27240 MAYFAIR CT

BONITA SPRINGS, FL 34135 BONITA SPRINGS, FL 34135

FEI Number: 59-3677897 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:

SOUTHWEST PROFESSIONAL SERVICES OF SO. FL. 13571 MCGREGOR BLVD #22 FT MYERS, FL 33919 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: MITCHELL STOVRING

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:

Title: DPS () Delete Title: (X) Change () Addition GRAMOLINI, PHILLIP GRAMOLINI, PHILLIP PRES. Name: Name: 27230 MAYFAIR CT 27230 MAYFAIR CT Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: BONITA SPRINGS, FL 34135

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

 Name:
 TOSTO, JOHN J
 Name:
 TOSTO, JOHN J SEC.

 Address:
 9893 CLEAR LAKE CIR
 Address:
 9893 CLEAR LAKE CIR

 City-St-Zip:
 NAPLES, FL 34109
 City-St-Zip:
 NAPLES, FL 34109

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.

SIGNATURE: PHILLIP GRAMOLINI PRES 10/23/2009