## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P01000012263

City-St-Zip:

CAPE CANAVERAL, FL 32920

FILED Aug 21, 2006 Secretary of State

Entity Nar	ne: DAYSTE	EEL, INC.			
Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
	IBURN ROAD NE, FL 3293				
Current M	ailing Addre	ss:	New Mailing Add	New Mailing Address:	
2845 WES UNIT 205 COCOA, F	T KING STRE L 32926	ΈΤ			
FEI Number:	59-3690575	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
DOWDY, DAVID 2485 BONNIE DRIVE COCOA, FL 32926 US			465 S VOLUSIA A AUITE C	ALL FLORIDA FIRM NONLAWYER 465 S VOLUSIA AVE AUITE C ORANGE CITY, FL 32763 US	
The above in the State	named entity of Florida.	submits this statement for the pu	urpose of changing its regis	stered office or registered agent, or both,	
SIGNATURE: DEVIN NEWMAN- ASSISTANT SECRETARY			ΓARY	08/21/2006	
	Electro	nic Signature of Registered Age	nt	Date	
		03(2)(b), F.S., the corporation did not g Trust Fund Contribution ( ).	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( DOWDY, DAVI 2485 BONNY I COCOA, FL 3	DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DOWDY, DEN 150 JOHNSON		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	S ( MILLS, WAYN 114 BUCHANA		Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip: