2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000024782

Entity Name: BONY'S TAILOR SHOP, INC.

FILED Jun 23, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

2347 TAMIAMI TRAIL 3031 DAVIS BLVD NAPLES, FL 34112 NAPLES, FL 34104

Current Mailing Address: New Mailing Address:

2347 TAMIAMI TRAIL 3031 DAVIS BLVD NAPLES, FL 34112 NAPLES, FL 34104

FEI Number: 59-3709380 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:

TRANCHANT, BONY
12425 COLLIER BLVD
105
NAPLES, FL 34116 US

TRANCHANT, BONY
3031 DAVIS BLVD
NAPLES, FL 34104 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: BONY TRANCHANT 06/23/2009

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:

D () Delete Title: D (X) Change () Addition TRANCHANT, BONY Name: TRANCHANT, BONY

 Name:
 TRANCHANT, BONY
 Name:
 TRANCHANT, BONY

 Address:
 12425 COLLIER BLVD., #125
 Address:
 3031 DAVIS BLVD

 City-St-Zip:
 NAPLES, FL 34116
 City-St-Zip:
 NAPLES, FL 34116

Title: D () Delete Title: D (X) Change () Addition
Name: TRANCHANT WADNER
Name: TRANCHANT WADNER

 Name:
 TRANCHANT, WADNER
 Name:
 TRANCHANT, WADNER

 Address:
 12425 COLLIER BLVD., #125
 Address:
 3031 DAVIS BLVD

 City-St-Zip:
 NAPLES, FL 34116
 City-St-Zip:
 NAPLES, FL 34104

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: BONY TRANCHANT PRES 06/23/2009