2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000069185

Entity Name: A/C DESIGNS OF FLORIDA, INC.

FILED Aug 28, 2008 Secretary of State

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

11730 PHILLIP HWY 3045 PACETTI RD.

JACKSONVILLE, FL 32216 ST. AUGUSTINE, FL 32092

Current Mailing Address: New Mailing Address:

3545-1 ST JOHNS BLUFF RD S #301 3045 PACETTI RD.

JACKSONVILLE, FL 32224 ST. AUGUSTINE, FL 32092

FEI Number: 59-3734635 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

TRITT, ARNOLD D JR CLANCE, WAYNE 707 PÉNINSULAR PLACE 5610 GRÉATPINE LA. N.

JACKSONVILLE, FL 32204 US US JACKSONVILLE, FL 32244

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: WAYNE CLANCE 08/28/2008

> 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

HARDIE, SUZANNE D HARDIE, SUZANNE D Name: Name: 3545-1 ST JOHNS BLUFF RD S #301 3045 PACETTI RD. Address: Address:

City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: ST. AUGUSTINE, FL 32092

DΡ Title: DΡ (X) Change () Addition Title: () Delete Name: HARDIE, PATRICK L Name: HARDIE, PATRICK L

3545-1 ST JOHNS BLUFF RD S #301 3045 PACETTI RD. Address: Address: JACKSONVILLE, FL 32224 ST. AUGUSTINE RD., FL 32029 City-St-Zip: City-St-Zip:

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

HANNA, ERIN K HANNA, ERIN K Name: Name: 3545-1 ST JOHNS BLUFF RD S #301 3045 PACETTI RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: ST. AUGUSTINE, FL 32092

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: PATRICK L. HARDIE P/D 08/28/2008