2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000072634

Entity Name: J & M WILDASIN CORPORATION

FILED Jun 07, 2007 Secretary of State

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

9184 NUGENT TRAIL 9257 DELEMAR CT

WEST PALM BEACH, FL 33411 WELLINGTON, FL 33414

Current Mailing Address: New Mailing Address:

9184 NUGENT TRAIL 9257 DELEMAR CT

WEST PALM BEACH, FL 33411 WELLINGTON, FL 33414

FEI Number: 65-1124257 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:

BEALE, DAVID A P.A. WILDASIN, MANDY J 355 NE 5TH AVE 9257 DELEMAR CT

SUITE#1 WELLINGTON, FL 33414 US DELRAY BEACH, FL 33483 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: MANDY WILDASIN 06/07/2007

> 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: (X) Change () Addition () Delete Title: Name:

WILDASIN, JOEY L WILDASIN, JOEY L Name: 9257 DELEMAR CT 8964 ALEXANDRA CIR Address: Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414

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

WILDASIN, MANDY J Name: Name: WILDASIN, MANDY J 8964 ALEXANDRA CIR Address: 9257 DELEMAR CT Address: WELLINGTON, FL 33414 WELLINGTON, FL 33414 City-St-Zip: City-St-Zip:

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: MANDY WILDASIN 0 06/07/2007