

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000084294

**Entity Name:** EXHIBIT EFFECTS, INC.

**FILED**  
**Feb 28, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

9628 VIA EMILIE  
BOCA RATON, FL 33428

**New Principal Place of Business:**

**Current Mailing Address:**

9628 VIA EMILIE  
BOCA RATON, FL 33428

**New Mailing Address:**

**FEI Number:** 65-1133277

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

GAYLE, ELLIOTT  
9628 VIA EMILIE  
BOCA RATON, FL 33428 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:** GAYLE S. ELLIOTT

02/28/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PSTD  
**Name:** ELLIOTT, GAYLE S  
**Address:** 9628 VIA EMILIE  
**City-St-Zip:** BOCA RATON, FL 33428

I hereby 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 all other like empowered.

**SIGNATURE:** GAYLE S. ELLIOTT

PSTD

02/28/2014

Electronic Signature of Signing Officer or Director

Date