

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000108284

FILED
Nov 24, 2008
Secretary of State

Entity Name: MEDCO SOLUTIONS AND CONSULTING INC.

Current Principal Place of Business:

205 SE 15TH TERR
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

201 SE 15TH TERR
DEERFIELD BEACH, FL 33441

Current Mailing Address:

P.O. BOX 1151
DEERFIELD BEACH, FL 33443

New Mailing Address:

1608 SE 6 ST
DEERFIELD BEACH, FL 33443

FEI Number: 02-0649377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILD, WILLIAM E
205 SE 15TH TERR
DEERFIELD BEACH, FL 33441 US

Name and Address of New Registered Agent:

WILD, WILLIAM E
201 SE 15TH TERR
DEERFIELD BEACH, FL 33441 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: WILLIAM WILD

11/24/2008

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:

Title: P () Delete
Name: WILD, WILLIAM E
Address: POST OFFICE BOX 1151
City-St-Zip: DEERFIELD BEACH, FL 33443

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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: WILLIAM WILD

PRES

11/24/2008

Electronic Signature of Signing Officer or Director

Date