2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000120367

FILED Apr 30, 2008 Secretary of State

Entity Name: PROFESSIONAL FENCING OF CENTRAL FLORIDA INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
	S HWY 441 ND PARK, FL 34731	US			
Current M	lailing Address:		New Mailing Addres	s:	
P.O. BOX FRUITLAN	183 ND PARK, FL 34731	US			
FEI Number	: 55-0805043 FEIN	Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
000711111	. HILLS BOULEVARD				
The above in the State	(E, FL 32159 US		purpose of changing its registere	ed office or registered agent, or both,	
The above in the State	E, FL 32159 US named entity submite of Florida. RE: JEFF DIXON			od office or registered agent, or both, Date	
The above in the State SIGNATUI	e named entity submite of Florida. RE: JEFF DIXON Electronic Signate with s. 607.193(2)(b),	s this statement for the nature of Registered Ag			
The above in the State SIGNATUI In accordan Election Car	e named entity submit e of Florida. RE: <u>JEFF DIXON</u> Electronic Sign	s this statement for the nature of Registered Ag F.S., the corporation did no Fund Contribution ().	ent ot receive the prior notice.		
The above in the State SIGNATUI In accordan Election Car	e named entity submite of Florida. RE: JEFF DIXON Electronic Signate with s. 607.193(2)(b), mpaign Financing Trust	s this statement for the nature of Registered Ag F.S., the corporation did n Fund Contribution (). :	ent ot receive the prior notice.	Date	

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: JEFF DIXON P 04/30/2008