

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000125094

Entity Name: GALEY, INC.

FILED
Jan 21, 2009
Secretary of State

Current Principal Place of Business:

2418 MILLCREEK COURT
SUITE 3
TALLAHASSEE, FL 32308

New Principal Place of Business:

2949 PINE VALLEY DRIVE
MIRAMAR BEACH, FL 32550

Current Mailing Address:

2418 MILLCREEK COURT
SUITE 3
TALLAHASSEE, FL 32308

New Mailing Address:

2949 PINE VALLEY DRIVE
MIRAMAR BEACH, FL 32550

FEI Number: 43-1999129

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GALEY, ROMAN
2418 MILLCREEK COURT
SUITE 3
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

GALEY, LESLIE L
2949 PINE VALLEY DRIVE
MIRAMAR BEACH, FL 32550 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: LESLIE L. GALEY

01/21/2009

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: D () Delete
Name: GALEY, ROMAN
Address: 2418 MILLCREEK COURT, SUITE 3
City-St-Zip: TALLAHASSEE, FL 32308

Title: D (X) Delete
Name: GALEY, LESLIE
Address: 2418 MILLCREEK COURT, SUITE 3
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GALEY, LESLIE L
Address: 2949 PINE VALLEY DRIVE
City-St-Zip: MIRAMAR BEACH, FL 32550

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: LESLIE L. GALEY

D

01/21/2009

Electronic Signature of Signing Officer or Director

Date