2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000131627

Entity Name: 3 S OF TALLAHASSEE INC.

FILED Nov 03, 2004 Secretary of State

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

4026 ARDARA DR
TALLAHASSEE, FL 32309
444 APPLEYARD DR
TALLAHASSEE, FL 32304
TALLAHASSEE, FL 32304

Current Mailing Address: New Mailing Address:

4026 ARDARA DR 7124 SUMMIT RIDGE DR TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32312

FEI Number: 14-1861249 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMITH, BRIAN A
4026 ARDARA DR
TALLAHASSEE, FL 32309 US
SMITH, BRIAN A
7124 SUMMIT RIDGE DR
TALLAHASSEE, FL 32312 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: BRIAN A. SMITH 11/03/2004

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: P () Delete Title: P (X) Change () Addition Name: SMITH, BRIAN Name: SMITH, BRIAN

Address: 4026 ARDARA DR Address: 7124 SUMMIT RIDGE DR
City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32312

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

Name: SMITH, KERRI Name: SMITH, KERRI

Address: 4026 ARDARA DR Address: 7124 SUMMIT RIDGE DR
City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32312

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRIAN A. SMITH P 11/03/2004