

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000026248

Entity Name: SILVER LINING AIR SERVICES, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

2828 CORAL WAY
PUNTA GORDA, FL 33950

New Principal Place of Business:

6855 MANASOTA KEY ROAD
ENGLEWOOD, FL 34223

Current Mailing Address:

2828 CORAL WAY
PUNTA GORDA, FL 33950

New Mailing Address:

6855 MANSOTA KEY ROAD
ENGLEWOOD, FL 34223

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POTTS, RICK L
2828 CORAL WAY
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

POTTS, RICK L
6855 MANASOTA KEY ROAD
ENGLEWOOD, FL 34223 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: RICK L POTTS

04/25/2005

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: PD () Delete
Name: POTTS, RICK L
Address: 2828 CORAL WAY
City-St-Zip: PUNTA GORDA, FL 33950

Title: VD () Delete
Name: CONNER, TINA M
Address: 2828 CORAL WAY
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: POTTS, RICK L
Address: 6855 MANASOTA KEY ROAD
City-St-Zip: ENGLEWOOD, FL 34223

Title: VD (X) Change () Addition
Name: POTTS, TINA M
Address: 6855 MANASOTA KEY ROAD
City-St-Zip: ENGLEWOOD, FL 34223

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: RICK L POTTS

PD

04/25/2005

Electronic Signature of Signing Officer or Director

Date