

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000050554

Entity Name: HALO ENTERPRISES, INC.

FILED
Sep 30, 2009
Secretary of State

Current Principal Place of Business:

11819 N MAIN STREET
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

11819 N MAIN STREET
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 06-1697665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATTISTIC, KIMBERLY A
11819 N MAIN ST
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

MC DOWELL, KIMBERLY A
11819 N MAIN ST
JACKSONVILLE, FL 32218 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: KIMBERLY MC DOWELL

09/30/2009

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: DPST () Delete
Name: BATTISTIC, KIMBERLY A
Address: 11819 N MAIN STE
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: MCDOWELL, KIMBERLY A
Address: 11819 N MAIN STE
City-St-Zip: JACKSONVILLE, FL 32218

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: KIMBERLY MCDOWELL

PRES

09/30/2009

Electronic Signature of Signing Officer or Director

Date