2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000059344

Entity Name: GMC NATIONWIDE, INC.

FILED Oct 08, 2004 Secretary of State

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

251 SW 32ND COURT ROAD 15715 SOUTH DIXIE HWY MIAMI, FL 33135

SUITE 234 MIAMI, FL 33157

Current Mailing Address: New Mailing Address:

PO BOX 924247 PO BOX 140741 CORAL GABLES, FL 33114 MIAMI, FL 33092

FEI Number: 56-2364501 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:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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:

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: () Delete Title: (X) Change () Addition MCCALLISTER, GREGORY MCCALLISTER, GREGORY Name: Name: 251 SW 32ND COURT ROAD 15715 SOUTH DIXIE HWY, SUITE 234 Address: Address:

City-St-Zip: MIAMI, FL 33135 City-St-Zip: MIAMI, FL 33157

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

MCDONALD, FORREST Name: ESCALONA, IRAIDA Name:

251 SW 32ND COURT ROAD Address: 15715 SOUTH DIXIE HWY, SUITE 234 Address:

MIAMI, FL 33135 MIAMI, FL 33157 City-St-Zip: City-St-Zip:

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: GREGORY MCCALLISTER PD 10/08/2004