2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000059344

Entity Name: GMC NATIONWIDE, INC.

FILED Nov 12, 2005 Secretary of State

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

27001 SW 145 AVENUE ROAD 15715 SOUTH DIXIE HWY

SUITE 234 MIAMI, FL 33032 MIAMI, FL 33157

Current Mailing Address: New Mailing Address:

PO BOX 924247 MIAMI, FL 33092

FEI Number: 56-2364501 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MCCALLISTER, GREGORY M PD 27001 SW 145 AVENUE ROAD HOMESTEAD, FL 33032

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: GREGORY MCCALLISTER 11/12/2005

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title: () Delete Title: MCCALLISTER, GREGORY Name: Name:

MCCALLISTER, GREGORY M PD 15715 SOUTH DIXIE HWY, SUITE 234 Address: 27001 SW 145 AVENUE ROAD Address:

City-St-Zip: MIAMI, FL 33157 City-St-Zip: HOMESTEAD, FL 33032 US

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

MCDONALD, FORREST Name: 15715 SOUTH DIXIE HWY, SUITE 234 Address: Address: 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 11/12/2005