## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000078610

Entity Name: LARINTA INC.

FILED Mar 28, 2008 Secretary of State

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

950 S. WINTER PARK DRIVE 518 ONE CENTER BLVD.

SUITE 305 202

CASSELBERRY, FL 32707 ALTAMONTE SPRINGS, FL 32701

Current Mailing Address: New Mailing Address:

950 S. WINTER PARK DRIVE 518 ONE CENTER BLVD.

SUITE 305

CASSELBERRY, FL 32707 ALTAMONTE SPRINGS, FL 32701

FEI Number: 20-0307009 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:

CHUKWUEMEKA ONYIUKE, LAWRENCE CHUKWUEMEKA ONYIUKE, LAWRENCE

950 S. WINTER PARK DRIVE 518 ONE CENTER BLVD

SUITE 305
CASSELBERRY, FL 32707 US
202
ALTAMONTE SPRINGS, FL 32701 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: LAWRENCE CHUKWUEMEKA 03/28/2008

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: PSTD ( ) Delete Title: **PSTD** (X) Change ( ) Addition CHUKWUEMEKA ONYIUKE, LAWRENCE CHUKWUEMEKA ONYIUKE, LAWRENCE Name: Name: 950 S. WINTER PARK DRIVE - STE. 305 Address: 518 ONE CENTER BLVD #202 Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: LAWRENCE CHUKWUEMEKA P 03/28/2008