## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000083450

City-St-Zip:

FORT LAUDERDALE, FL 33312 US

Entity Name: NATION LAWN SERVICE, INC.

FILED Jan 25, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1871 NW 58 TER #2 4630 N. UNIVERSITY DR. SUNRISE, FL 33313 112 CORAL SPRINGS, FL 33067 **Current Mailing Address: New Mailing Address:** 1871 NW 58 TER #2 4630 N. UNIVERSITY DR SUNRISE, FL 33313 CORAL SPRINGS, FL 33067 FEI Number: 73-1675461 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: CORPORATE CREATIONS NETWORK INC. CORPORATE CREATION NETWORK INC. 11380 PROSPERITY FARMS RD #221E 11380 PROSPERITY FARMS RD #221E PALM BCH GARDENS, FL 33410 PALM BEACH GARDENS, FL 33410 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: TAIDE BAEZ 01/25/2009 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MULLINGS, ANDRE Name: Name: 1871 NW 58 TER #2 Address: Address: City-St-Zip: SUNRISE, FL 33313 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LYONS, PANSY Name: 1871 NW 58 TER #2 Address: Address: SUNRISE, FL 33313 City-St-Zip: City-St-Zip: Title: Title: MGR (X) Delete () Change () Addition LUE, MICHAEL R Name: Name: 208 UTAH AVENUE Address: Address:

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.

City-St-Zip:

SIGNATURE: ANDRE MULLINGS P 01/25/2009