## 2006 FOR PROFIT CORPORATION

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	REINSTA	TEMENT						112
1. Entity Nam	MENT #:P030,00094 HENS, INC.	901			06	FILE		14
Principal Place	e of Business	Mailing Address			ر. ډي:	Δ		
2308 GOLD F ST AUGUSTIN	FINCH PLACE Ie, Fl. 32084 us	2308 GOLD FINCH PLA ST AUGUSTINE, FL 320			TALL	AHASSEE,	FLORIDA	
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2. Principal P	lace of Business	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		P	EINSTA	FEME	098 (11/05)	Q P
City & State	e	City & State			4. FEI Number 20-007293	 6	<del> </del>	oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of Sta	atus Desired	S8.75 Add	
	6. Name and Address of Current	Registered Agent			7. Name and Add	ress of New Rec	jistered Agent	
LOGUIDIC	E, JOE L SEWOOD AVENUE		Name Street	<u>Soe</u> Address (F	- Loquidic			
STE A						· · · · ·		
HOLLY HIL	LL, FL 32117		<u> </u>	<u>15 A</u>	Ridge woo	od Ave		
			City	Holly	Hill, FI		FL Zin Cod	
	named entity submits this statement fo ions of registered agent.	r the purpose of changing its	egistered office	or registere	ed agent, ór both, in	the State of Florid	da. I am familiar with,	and accept
SIGNATURE	Joe Loquidice Signature, typed or printed nation registered agent	and title if applicable (NO)	E: Registered Agent sig	niuper erutan	ed when reinstating)		/3//06 DATE	<del></del>
	E NOW!!!  FEE IS \$750.00 luary 1, 2007, Fee will be \$900.0	0						
10.	OFFICERS AND	DIRECTORS	11,		ADDITIONS/CHA	NGES TO OFFIC	ERS AND DIRECTOR	S IN 11
TITLE	P CTERNENC BURY A	☐ Delete	TITLE		1 1 34 00 40 00		Change	Addition
NAME STREET ADDRESS	STEPHENS, RUDY A 2308 GOLD FINCH PLACE		NAME STREET ADDRESS	;	I I val site of mor	الإىسى» قرالىكىلىلىلىدە: الا	THE PARTY AND A CASE OF STATE	
CITY-ST-ZIP	AT AUGUSTINE, FL 32084		CITY-ST-ZIP					
TITLE NAME	T KORKES, KIRK M	☐ Delete	TITLE NAME				Change	Addition
STREET ADDRESS	97 PEBBLE BEACH DRIVE		STREET ADDRESS	;				
CITY-ST-ZIP	PALM COAST, FL 32164		CITY-\$1-ZIP					
TITLE NAME		☐ Delete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS	,		STREET ADORESS	;				
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		CITY-ST-ZIP					
TITLE NAME		☐ Detete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS			STREET ADDRESS	5				
CITY-ST-ZIP			CITY-ST-ZIP	<u> </u>			C7 05	
TITLE NAME		☐ Delete	TITLE NAME				☐ Change	Addition
STREET ADDRESS			STREET ADDRESS	5				
CITY-ST-ZIP		Delete	CITY-\$T-ZIP				☐ Change	☐ Addition
NAME		La Delete	NAME				_ ,	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	5	<b>K.</b>	Eckel NO	V 1 5 2009	
12. I hereby of indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emp or on an attachment with appraddress.	this filing does not qualify fo strue and accurate and that rowered to execute this report	or the exemptions my signature shall as required by C	contained have the s hapter 607	in Chapter 119, Flor same legal effect as i , Florida Statutes; an	ida Statutes. I fu f made under oa id that my name	irther certify that the ir ith; that I am an officer appears in Block 10 o	or director or Block 11 if
changed,	or on an attachment with the address,	with all other like empowered				, ,		
SIGNAT	URE:SIGNATURE AND TYPED OR I	PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR			31/06 Date	386 - 304 - Dayune Prione #	1000

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## R.A. Stephens, Inc 2308 Gold Finch Place St Augustine, Fl 32084

October 31, 2006

To Whom It May Concern:

I was told that I should have received a post card advising me to pay my reinstatement fee, how ever I never received one. I only realized that my corporation was inactive when I looked on the website. Please accept my reinstatement fee of \$150.00 to reinstate my corporation. Thank You for your help concerning this matter.

Rudy Stephens