

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000110387

Entity Name: IBFF, INC.

FILED
Nov 22, 2010
Secretary of State

Current Principal Place of Business:

3269 DOCTORS LAKE DRIVE
ORANGE PARK, FL 32065

New Principal Place of Business:

3269 DOCTORS LAKE DRIVE
ORANGE PARK, FL 32073

Current Mailing Address:

3269 DOCTORS LAKE DRIVE
ORANGE PARK, FL 32065

New Mailing Address:

3269 DOCTORS LAKE DRIVE
ORANGE PARK, FL 32073

FEI Number: 16-1689245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCINTYRE, GARRY C
3269 DOCTORS LAKE DRIVE
ORANGE PARK, FL 32065 US

Name and Address of New Registered Agent:

MCINTYRE, GARRY C
3269 DOCTORS LAKE DRIVE
ORANGE PARK, FL 32073 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: GARRY C MCINTYRE

11/22/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: O
Name: MCINTYRE, GARRY C
Address: 3269 DOCTORS LAKE DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: O
Name: MCINTYRE, CAROL S
Address: 3269 DOCTORS LAKE DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: D
Name: MCINTYRE, MARC C
Address: 3269 DOCTORS LAKE DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: D
Name: MCINTYRE, RYAN K
Address: 3269 DOCTORS LAKE DRIVE
City-St-Zip: ORANGE PARK, FL 32073

I hereby 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 all other like empowered.

SIGNATURE: GARRY C MCINTYRE

PRES

11/22/2010

Electronic Signature of Signing Officer or Director

Date