2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000122853

Entity Name: JOT HOME IMPROVEMENTS INC

FILED Apr 22, 2009 Secretary of State

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

350 PORPOISE ROAD VENICE, FL 34293

Current Mailing Address: New Mailing Address:

350 PORPOISE ROAD VENICE, FL 34293

FEI Number: 20-0352888 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:

POTH, RONALD W 350 PÓRPOISE ROAD VENICE, FL 34293

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: RONALD POTH

Electronic Signature of Registered Agent Date

Title:

Title:

Name:

Address:

City-St-Zip:

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

(X) Change () Addition

(X) Change () Addition

Title: () Delete Title: POTH, RONALD Name: Name: 350 PORPOISE ROAD Address: Address: City-St-Zip:

City-St-Zip: VENICE, FL 34293 US Title: () Delete

POTH, KIMBERLIE Name: 350 PORPOISE ROAD Address: VENICE, FL 34293 US City-St-Zip:

Title: () Delete BAXTER, JENNIFER Name: 350 PORPOISE ROAD Address: City-St-Zip: VENICE, FL 34293

Title: () Delete COLPITTS, TIFFANY Name: Address: 350 PORPOISE ROAD

VENICE, FL 34293

City-St-Zip:

CARDEN, JOSEPH B Name: 350 PORPOISE RD

POTH, RONALD W

350 PORPOISE ROAD

VENICE, FL 34293 US

POTH. KIMBERLIE M

350 PORPOISE ROAD

VENICE, FL 34293 US

Address: City-St-Zip: VENICE, FL 34293

VP/T

Title: (X) Change () Addition

MERSER, BEN Name: Address: 350 PORPOISE RD City-St-Zip: VENICE, FL 34293

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: RONALD POTH **PRES** 04/22/2009