

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000132516

FILED
Oct 06, 2009
Secretary of State

Entity Name: STRICKLY INSTALLATIONS, INC.

Current Principal Place of Business:

8438 ARBOUR LAKE DR., APT. 104
LEESBURG, FL 34788 US

New Principal Place of Business:

511 N SAINT CLAIR ABRAMS AVE
TAVARES, FL 32778 US

Current Mailing Address:

8438 ARBOUR LAKE DR., APT. 104
LEESBURG, FL 34788 US

New Mailing Address:

511 N SAINT CLAIR ABRAMS AVE
TAVARES, FL 32778 US

FEI Number: 19-3544387

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GETZ, JONATHAN
8438 ARBOUR LAKE DR., APT. 104
LEESBURG, FL 34788 US

Name and Address of New Registered Agent:

GETZ, JONATHAN
511 N SAINT CLAIR ABRAMS AVE
TAVARES, FL 32778 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: JONATHAN GETZ

10/06/2009

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:

Title: PD () Delete
Name: GETZ, JONATHAN
Address: 8438 ARBOUR LAKE DR., APT. 104
City-St-Zip: LEESBURG, FL 34788 US

Title: STD (X) Delete
Name: HELLER, MELISSA L
Address: 8438 ARBOUR LAKE DR., APT. 104
City-St-Zip: LEESBURG, FL 34788 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GETZ, JONATHAN R
Address: 511 N SAINT CLAIR ABRAMS AVE
City-St-Zip: TAVARES, FL 32778 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JONATHAN GETZ

PD

10/06/2009

Electronic Signature of Signing Officer or Director

Date