2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000142333

City-St-Zip:

GAINESVILLE, FL 32605

FILED Nov 13, 2006 Secretary of State

Entity Name: JOCELYNN CORPORATION					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4131 NW 28TH LANE SUITE 5 GAINESVILLE, FL 32606			1035 NW 57TH STREI GAINESVILLE, FL 326		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4131 NW 28TH LANE SUITE 5 GAINESVILLE, FL 32606				1035 NW 57TH STREET GAINESVILLE, FL 32605	
FEI Number:	: 51-0490358	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US			1035 ŃW 57TH STREI	HOLT, JOCELYN D PSD 1035 NW 57TH STREET GAINESVILLE, FL 32605 US	
	named entity s e of Florida.	submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JOCELYN D. HOLT				11/13/2006	
Electronic Signature of Registered Agent			nt	Date	
		3(2)(b), F.S., the corporation did not Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSD () HOLT, JOCELY 1479 SE 5TH A' MELROSE, FL	VENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TCEO () DOMENECH, L' 4926 NW 18TH GAINESVILLE,	PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () DOMENECH, L' 4926 NW 18TH		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JOCELYN D. HOLT **PSD** 11/13/2006