2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Feb 13, 2007
Secretary of State

DOCUMENT# P03000155013

Entity Name: L & L A CUT ABOVE THE BEST, INC.

Current Principal Place of Business:

13779 S.E. 42ND AVENUE
SUMMERFIELD, FL 34491

New Principal Place of Business:

NE 52ND AVE
OCALA, FL 34470

Current Mailing Address:

13779 S.E. 42ND AVENUE
SUMMERFIELD, FL 34491

New Mailing Address:

NE 52ND AVE
OCALA, FL 34470

FEI Number: 20-0562966 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOTO, LUIS N
13779 S.E. 42ND AVENUE
SUMMERFIELD, FL 34491 US

Name and Address of New Registered Agent:

SOTO, LUIS N
NE 52ND AVE
OCALA, FL 34470 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: LUKE M POWELL 02/13/2007
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: D ( ) Delete
Name: SOTO, LUIS N
Address: 13779 S.E. 42ND AVENUE
City-St-Zip: SUMMERFIELD, FL 34491

Title: D ( ) Delete
Name: POWELL, LUKE M
Address: 9308 BAHIA ROAD
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SOTO, LUIS N
Address: NE 52ND AVE
City-St-Zip: OCALA, FL 34470

Title: D (X) Change ( ) Addition
Name: POWELL, LUKE M
Address: 169 PINE RD
City-St-Zip: OCALA, FL 34472

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.

SIGNATURE: LUKE M POWELL D 02/13/2007
Electronic Signature of Signing Officer or Director Date