2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000156050

Address:

City-St-Zip:

138 MAGNOLIA DR

WINTER HAVEN, FL 33881

DI EDOGE A GAVILODO INO

FILED Oct 19, 2009 Secretary of State

Entity Nai	me: BLEDSOI	E & SAYLORS, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
138 MAGN WINTER H	NOLIA DR HAVEN, FL 33	881	128 MAGNOLIA DR WINTER HAVEN, FL 3	33881	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
138 MAGN WINTER H	IOLIA DR HAVEN, FL 33	881	128 MAGNOLIA DR WINTER HAVEN, FL 3	33881	
FEI Number	: 20-0547053	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent	: Name and Address of	Name and Address of New Registered Agent:	
138 MAGN	I, ROBERT J NOLIA DR HAVEN, FL 33	881 US	SAYLOR, RUSSELL 128 MAGNOLIA DR WINTER HAVEN, FL 3	33881 US	
	named entity s e of Florida.	submits this statement for t	he purpose of changing its registered	office or registered agent, or both,	
SIGNATURE: RUSSELL SAYLOR				10/19/2009	
	Electron	ic Signature of Registered	Agent	Date	
		3(2)(b), F.S., the corporation dig Trust Fund Contribution ().	id not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () SAYLOR, RUSS 128 MAGNOLIA WINTER HAVE	DR	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SAYLOR, CHAF 201 WOODFEF WINTER HAVE	RN DR NE	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (X)	Delete BERT J	Title: (() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: RUSSELL SAYLOR **PRES** 10/19/2009