2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000011836

Entity Name: CESVI FLOORING, INC

FILED Oct 23, 2009 Secretary of State

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

6222 MIMOSA DR. 3300 CIMARRON DR ORLANDO, FL 32807 ORLANDO, FL 32829

Current Mailing Address: New Mailing Address:

6222 MIMOSA DR. 3300 CIMARRON DR ORLANDO, FL 32807 ORLANDO, FL 32829

FEI Number: 65-1213315 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:

CESPEDES, AUGUSTO
6222 MIMOSA DR.
ORLANDO, FL 32807 US

CESPEDES, AUGUSTO
3300 CIMARRON DR
ORLANDO, FL 32829 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: AUGUSTO CESPEDES 10/23/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CESPEDES, AUGUSTO CESPEDES, AUGUSTO Name: Name: 6222 MIMOSA DR. 3300 CIMARRON DR Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: ORLANDO, FL 32829

Title: VP () Delete Title: VP (X) Change () Addition Name: HERNANDEZ, ALBERTO S Name: HERNANDEZ, ALBERTO S

 Name:
 HERNANDEZ, ALBERTO S
 Name:
 HERNANDEZ, ALBERTO S

 Address:
 6222 MIMOSA DR.
 Address:
 3300 CIMARRON DR

 City-St-Zip:
 ORLANDO, FL 32807
 City-St-Zip:
 ORLANDO, FL 32829

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SANTIAGO, DEMETRIO
 Name:
 SANTIAGO, DEMETRIO

 Address:
 6222 MIMOSA DR.
 Address:
 3300 CIMARRON DR

 City-St-Zip:
 ORLANDO, FL 32807
 City-St-Zip:
 ORLANDO, FL 32829

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: AUGUSTO CESPEDES P 10/23/2009