2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000016357

Entity Name: MIKE SUSEWITT INC.

FILED Oct 26, 2006 Secretary of State

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

% MICHAEL SUSEWITT 25814 PINEHURST ST

P O BOX 902 SORRENTO, FL 32776 US SORRENTO, FL 32776

New Mailing Address: Current Mailing Address:

% MICHAEL SUSEWITT PO BOX 902

P O BOX 902 SORRENTO, FL 32776 US SORRENTO, FL 32776

FEI Number: 51-0493685 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:

OLSON, TERRY SUSEWITT, MICHAEL 545 N ÚMATILLA BLVD 25814 PINEHURST ST

UMATILLA, FL 32784 SORRENTO, FL 32776 US 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: MICHAEL SUSEWITT 10/26/2006

> 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

SUSEWITT, MICHAEL SUSEWITT, MICHAEL Name: Name: 25814 PINEHURST ST 25814 PINEHURST ST Address: Address: City-St-Zip: SORRENTO, FL 32776 City-St-Zip: SORRENTO, FL 32776 US

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

HEDEGARD, BRIAN Name: Name: HEDEGARD, BRIAN 25814 PINEHURST ST 25814 PINEHURST ST Address: Address: SORRENTO, FL 32776 SORRENTO, FL 32776 US City-St-Zip: City-St-Zip:

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

MALEC, WALTER MALEC, WALTER Name: Name: 25814 PINEHURST ST 25814 PINEHURST ST Address: Address: City-St-Zip: SORRENTO, FL 32776 City-St-Zip: SORRENTO, FL 32776 US

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.

Ρ SIGNATURE: MICHAEL SUSEWITT 10/26/2006