2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000022302 1. Entity Name				FILED
BANTLE SERVICES, INC.				06 NAR 14 AN 10: 53
Principal Place of Business Mailing Address		=		SECRETA TALLAHAMAH, PLONDA
		8647 NW 35TH ROAD Gainesville, FL 32606		TO COMPA
				. I (REGIDE) III BEGII CIEN BENII ERINI ERINI ERIN IRRIB IIRTE IIRT IIRI ERINE IIRTEN IIRI IRRIB
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02282008 1 REIN PO TE CR2E DOS (1705) 05-06
City & State		City & State		4. FEI Number Applied For Not Applied For
Zip	Country	Zip	Country	5. Certificate of Status Desired
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
MORENO, JOSE I			Name	
610 NW 122ND STREET GAINESVILLE, FL 32607			Street Addr	ess (P.O. Box Number is Not Acceptable)
O/ 125 11				
			City	FL Zip Code
8. The above named entity surghits this settlement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE METALO Q & Ellos 3-806				
Signatura, typid or printed name of registored agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.				
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME	P BANTLE, WILLIAM A	☐ Delete	TITLE NAME	Change
STREET ADDRESS CITY-ST-ZIP	8647 NW 35TH ROAD GAINESVILLE, FL 32606		STREET ADDRESS City-St-Zip	04/05/0601041004 **300.00
TITLE	SEC	☐ Delete	TITLE	Change Addition
NAME STREET ADDRESS	BANTLE, WILLIAM A 8647 NW 35TH ROAD		NAME STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE, FL 32606		CITY-ST-ZIP	
TITLE	T DANTE WELLIAM	☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS	BANTLE, WILLIAM A 8647 NW 35TH ROAD	•	NAME STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE, FL 32606		CITY-ST-ZIP	
TITLE NAME		☐ Delete	TITLE NAME	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	· ·
1ITLE		☐ Delete	TITLE	☐ Change ☐ Addition
name Street address			NAME STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE NAME	☐ Change ☐ Addition
NAME STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP		AL MARKET ALL THE STATE OF THE	CITY-ST-ZIP	in Chapter 110 Staids Crabban I further endiff, that the information
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is firly and accurate and that my 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 truston-employee at the value this required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addless with all other life expowered.				
changed, or on an attachment with an addless with all other life of powered.				
SIGNAT	TURE:	Jano		2-8-06 3770 or
SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR COLUMN 352-870 4362				
				1 / 5// / 3 3 4 5 7 / 10 / 20 6 / 2