2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000026382

Entity Name: HODGE COMPUTER SYSTEMS, INC.

FILED Oct 09, 2007 Secretary of State

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

100 AVIATION DR. 4888 DAVIS BLVD. #110 SUITE 104 NAPLES, FL 34104 NAPLES, FL 34104

Current Mailing Address: New Mailing Address:

386 CHADDOCK RD. 4888 DAVIS BLVD. #110 ATTICA, NY 14011 NAPLES, FL 34104

FEI Number: 52-2440614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HODGE, JASON
386 CHADDOCK RD.
ATTICA, FL 14011 US
HODGE, JASON
4888 DAVIS BLVD. #110
NAPLES, FL 34104 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: JASON HODGE 10/09/2007

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition Name: HODGE, JASON Name: HODGE, JASON HODGE, JASON Address: 4888 DAVIS BLVD. #110

 Address:
 386 CHADDOCK RD
 Address:
 4888 DAVIS BLVD. #110

 City-St-Zip:
 ATTICA, NY 14011
 City-St-Zip:
 NAPLES, FL 34104

Title: VP () Delete Title: () Change () Addition

 Name:
 HODGE, JAMES
 Name:

 Address:
 334 BRADSTROM CIR. # C-201
 Address:

 City-St-Zip:
 NAPLES, FL 34113
 City-St-Zip:

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: JASON HODGE PSTD 10/09/2007