

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000040771

FILED
Mar 20, 2006
Secretary of State

Entity Name: BUTT BAG SYSTEMS, INC.

Current Principal Place of Business:

28000 SPANISH WELLS BOULEVARD
BONITA SPRINGS, FL 34135

New Principal Place of Business:

5640 NORTHBORO DR #201
NAPLES, FL 34110

Current Mailing Address:

28000 SPANISH WELLS BOULEVARD
BONITA SPRINGS, FL 34135

New Mailing Address:

5640 NORTHBORO DR #201
NAPLES, FL 34110

FEI Number: 51-0501831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWLAW, LLC
28000 SPANISH WELLS BOULEVARD
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

MANN, JAMES
5640 NORTHBORO DR #201
NAPLES, FL 34110 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: JAMES MANN

03/20/2006

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:

Title: P, D () Delete
Name: MANN, JAMES F III
Address: 28000 SPANISH WELLS BOULEVARD
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S, D (X) Delete
Name: KENDALL, MANN
Address: 28000 SPANISH WELLS BOULEVARD
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change () Addition
Name: MANN, JAMES F III
Address: 5640 NORTHBORO DR #201
City-St-Zip: NAPLES, FL 34110

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: JAMES MANN

PRES

03/20/2006

Electronic Signature of Signing Officer or Director

Date