2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000052374

Entity Name: LA ROCK ENTERPRISES, INC.

FILED Nov 15, 2006 Secretary of State

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

18989 N.E. ROCKY LANE 388 S ATLANTIC AVE

BRISTOL, FL 32321 ORMOND BEACH, FL 32176

Current Mailing Address: New Mailing Address:

18989 N.E. ROCKY LANE 388 S ATLANTIC AVE

BRISTOL, FL 32321 ORMOND BEACH, FL 32176

FEI Number: 03-0539625 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:

MEREDITH, MARION R MEREDITH, MARION R 18989 N.E. ROCKY LANE 388 S ATLANTIC AVE BRISTOL, FL 32321 ORMOND BEACH, FL 32176 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: MARION R MEREDITH 11/15/2006

> 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:

() Delete

Title:

Name:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MEREDITH, MARION R JR MEREDITH, MARION R JR Name: 18989 N.E. ROCKY LANE Address: 388 S ATLANTIC AVE BRISTOL, FL 32321 City-St-Zip: ORMOND BEACH, FL 32176

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

MEREDITH, LAURA Name: MEREDITH, LAURA Name: 18989 N.E. ROCKY LANE Address: 388 S ATLANTIC AVE Address: BRISTOL, FL 32321 ORMOND BEACH, FL 32176 City-St-Zip: 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: MARION MEREDITH **PRES** 11/15/2006