

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000059117

Entity Name: RENOVATION STYLE II, CO.

FILED
Feb 15, 2006
Secretary of State

Current Principal Place of Business:

PO BOX 1186
SARASOTA, FL 34230

New Principal Place of Business:

Current Mailing Address:

PO BOX 1186
SARASOTA, FL 34230

New Mailing Address:

FEI Number: 20-0974387

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARVER, RIAN
1861 BOYCE STREET
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

CARVER, RIAN
7597 PALMER GLEN CIRCLE
SARASOTA, FL 34240 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: RIAN CARVER

02/15/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARVER, BENJAMIN
Address: 1861 BOYCE STREET
City-St-Zip: SARASOTA, FL 34239

Title: V () Delete
Name: CARVER, RIAN
Address: 1861 BOYCE STREET
City-St-Zip: SARASOTA, FL 34239

Title: T () Delete
Name: CORKINS, JOSEPH
Address: PO BOX 1186
City-St-Zip: SARASOTA, FL 34230

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARVER, BENJAMIN
Address: 7597 PALMER CIRCLE
City-St-Zip: SARASOTA, FL 34240

Title: V (X) Change () Addition
Name: CARVER, RIAN
Address: 7597 PALMER GLEN CIRCLE
City-St-Zip: SARASOTA, FL 34240

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: BENJAMIN CARVER

P

02/15/2006

Electronic Signature of Signing Officer or Director

Date