2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000059527

4022 E. HENRY AVE.

TAMPA, FL 33610

Address:

City-St-Zip:

FILED Oct 17, 2007 Secretary of State

Entity Na	me: RAW DE	AL INC.			
Current Principal Place of Business:			New Principal Place of Business:		
4022 E. HI TAMPA, F	ENRY AVE. L 33610				
Current Mailing Address:			New Mailing Address:		
4022 E. HI TAMPA, F	ENRY AVE. L 33610				
FEI Number	: 34-1990352	FEI Number Applied For()	FEI Number Not Applicable	e () Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Add	Iress of New Registered Agent:	
	LOOD, ANTHO ENRY AVE. IL 33610 U				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its re	gistered office or registered agent, or both,	
SIGNATU	RE: ANTHON	IY YOUNGBLOOD			
Electronic Signature of Registered Agen			ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (YOUNGBLOOI 4022 E. HENR TAMPA, FL 33	Y AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD (JACKSON, JO 4022 E. HENR TAMPA, FL 33	Y AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (TIMMONS, CL 4022 E. HENR TAMPA, FL 33	Y AVE.	Address: 402	(X) Change () Addition KSON, JOPLIN 2 E. HENRY AVE. IPA, FL 33610	
Title: Name:	S (YOUNGBLOOI) Delete D. ANTHONY R	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ANTHONY YOUNGBLOOD PD 10/17/2007