2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 12, 2011
Secretary of State

DOCUMENT# P04000164295

Entity Name: TURNKEY UNLIMITED, INC.

Current Principal Place of Business:

816 HANCOCK BRIDGE PARKWAY
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

816 HANCOCK BRIDGE PARKWAY
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 20-2038338 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDRE, JACK
816 HANCOCK BRIDGE PARKWAY
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

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: JACK ANDRE

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: ANDRE, ARLENE
Address: 816 HANCOCK BRIDGE PARKWAY
City-St-Zip: CAPE CORAL, FL 33990

Title: VP
Name: ANDRE, JACK
Address: 816 HANCOCK BRIDGE PKWY
City-St-Zip: CAPE CORAL, FL 33990

Title: S
Name: ANDRE, ARLENE
Address: 816 HANCOCK BRIDGE PKWY
City-St-Zip: CAPE CORAL, FL 33990

Title: D
Name: ANDRE, JACK
Address: 816 HANCOCK BRIDGE PKWY
City-St-Zip: CAPE CORAL, FL 33990

Title: O
Name: ANDRE, JACK
Address: 816 HANCOCK BRIDGE PKWY
City-St-Zip: CAPE CORAL, FL 33990

Title: D
Name: ANDRE, ARLENE
Address: 816 HANCOCK BRIDGE PKWY
City-St-Zip: CAPE CORAL, FL 33990

I hereby 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 all other like empowered.

SIGNATURE: ARLENE ANDRE P 04/12/2011

Electronic Signature of Signing Officer or Director — Date