2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000165335 FILED 1. Entity Name WOOD AND STONE, INC. 05 NOV -7 PM 12: 14 SEUNCIARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 651 CLEARWATER LARGO ROAD 651 CLEARWATER LARGO ROAD LARGO, FL 33770 LARGO, FL 33770 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 09212005 REIN-P CR2E098 (6/04) City & State City & State Applied For 4. FEI Number 984402 20 -Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TITZEL, KENNETH-651 CLEARWATER LARGO ROAD Street Address (P.O. Box Number is Not Acceptable) LARGO, FL 33770 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. 4 NOV, 05 sature required when reinstating FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2006, Fee will be \$300.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE ☐ Change ☐ Addition TITLE TITZEL, KENNETH NAME NAME 651 CLEARWATER LARGO ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LARGO, FL 33770 CITY-ST-ZIP Delete ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP. Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attache en

OFFICER OR DIRECTOR