

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000167531

1. Entity Name
KELLYD GROUP, CORP.



FILED
05 OCT 14 PM 4:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**7171 CORAL WAY SUITE 209
MIAMI, FL 33155**

Mailing Address
**7171 CORAL WAY SUITE 209
MIAMI, FL 33155**

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



4. FEI Number
20-2010409

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**RODRIGUEZ, KELLYD
7171 CORAL WAY SUITE 209
MIAMI, FL 33155**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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.

SIGNATURE *[Signature]* DATE 10/4/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After January 1, 2006, Fee will be \$300.00**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RODRIGUEZ, KELLYD 7171 CORAL WAY SUITE 209 MIAMI, FL 33155 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200060627472 10/14/05--01054--023 **\$150.00
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12. I hereby certify that the information supplied with this filing 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 attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE 10/4/05 DAYTIME PHONE # (780) 217-4809

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

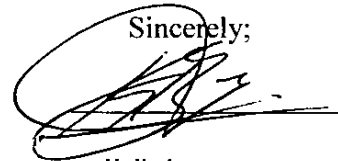
2282

October 10th, 2005

Kellyd group corp.

This letter is to inform that we did not send the payment for Kellyd group corp. because we never received the mail, and this is our first year with the company and we didn't know how the procedures of renewing are, we apologized for this inconvenience and we now know how this works for next year. We are sending you the application and the payment for renewing.
Thank you

Sincerely;

A handwritten signature in black ink, appearing to be "K. Kellyd", written over a horizontal line.

Kellyd group corp.