

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000023241

Entity Name: AUER TOOLS, INC

**FILED**  
**Sep 08, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

185 FOXRIDGE ROAD  
ORANGE PARK, FL 32065

**New Principal Place of Business:**

2809 CROSS CREEK DRIVE  
GREEN COVE SPRINGS, FL 32043

**Current Mailing Address:**

185 FOXRIDGE ROAD  
ORANGE PARK, FL 32065

**New Mailing Address:**

2809 CROSS CREEK DRIVE  
GREEN COVE SPRINGS, FL 32043

FEI Number: 20-2502224

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AUER, ROBERT  
185 FOXRIDGE ROAD  
ORANGE PARK, FL 32065 US

**Name and Address of New Registered Agent:**

AUER, ROBERT  
2809 CROSS CREEK DRIVE  
GREEN COVE SPRINGS, FL 32043 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: ROBERT AUER

09/08/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: AUER, ROBERT  
Address: 2809 CROSS CREEK DRIVE  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: ROBERT AUER

PRES

09/08/2010

Electronic Signature of Signing Officer or Director

Date