2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000048772

Entity Name: GUIDING EYE TECHNOLOGIES, INC.

FILED Apr 02, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

11221 SW 114 LANE CIRCLE 9361 SW 112 ST MIAMI, FL 33176 9361 SW 112 ST

Current Mailing Address: New Mailing Address:

11221 SW 114 LANE CIRCLE 9361 SW 112 ST MIAMI, FL 33176 9361 SW 112 ST

FEI Number: 52-2459123 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PATINO, ESTRELLITA
11221 SW 114 LANE CIRCLE
MIAMI, FL 33176 US

PATINO, ESTRELLITA
9361 SW 112 ST
MIAMI, FL 33176 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: ESTRELLITA PATINO 04/02/2009

Electronic Signature of Registered Agent Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 PATINO, AMIE VANESSA
 Name:
 PATINO, AMIE VANESSA

 Address:
 11221 SW 114 LANE CIRCLE
 Address:
 9361 SW 112 ST

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 MIAMI, FL 33176

Title: DT () Delete Title: DT (X) Change () Addition

 Name:
 PATINO, MIGUEL
 Name:
 PATINO, MIGUEL

 Address:
 11221 SW 114 LANE CIRCLE
 Address:
 9361 SW 112 ST

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 MIAMI, FL 33176

Title: D () Delete Title: D (X) Change () Addition

 Name:
 PATINO, ESTRELLITA
 Name:
 PATINO, ESTRELLITA

 Address:
 11221 SW 114 LANE CIRCLE
 Address:
 9361 SW 112 ST

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 MIAMI, FL 33176

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.

SIGNATURE: N/A 04/02/2009