2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000072317

Entity Name: GOLDEN OIL OF MIAMI CORP.

FILED Jan 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2401 NW 30 AVENUE 490 WEST PARK DR MIAMI, FL 33142 #204 MIAMI, FL 33172 **Current Mailing Address: New Mailing Address:** 2401 NW 30 AVENUE 490 WEST PARK DR MIAMI, FL 33142 #204 MIAMI, FL 33172 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FLORES, IMARA 490 WEST PARK DR #204 MIAMI, FL 33172 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: IMARA FLORES 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition FLORES, IMARA Name: Name: 490 WEST PARK DR #204 Address: Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: FLORES, RODRIGO X Name: 490 WEST PARK DR #204 Address: Address: MIAMI, FL 33172 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: IMARA FLORES 01/23/2009