2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000097722

348 GREENWOOD CIRCLE

PANAMA CITY, FL 32407

Address:

City-St-Zip:

FILED Jan 13, 2009 Secretary of State

00011		0000007722		ocorciary or otate	
Entity Na	me: DOUB	LE D & M ENTERPRISE, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	ST HIGHWA' CITY BEACH	Y 98A H, FL 32407			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ST HIGHWA' CITY BEACH	Y 98A H, FL 32407			
FEI Number	: 20-3128265	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
348 GREE	, MELANIE ENWOOD CI CITY, FL 32		348 GREÉNWOOD CIF	DURHAM, DOUGLAS H 348 GREENWOOD CIRCLE PANAMA CITY, FL 32407 US	
	e named enti e of Florida.	ty submits this statement for th	e purpose of changing its registered	office or registered agent, or both,	
SIGNATURE: DOUGLAS H DURHAM				01/13/2009	
	Elect	ronic Signature of Registered A	√gent	Date	
		.193(2)(b), F.S., the corporation did cing Trust Fund Contribution ().	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DURHAM, D 348 GREEN	() Delete OUGLAS H WOOD CIRCLE TY, FL 32407	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:		(X) Delete OUGLAS H WOOD CIRCLE TY, FL 32407	Title: 0 Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	D DURHAM. D	(X) Delete OUGLAS H	Title: (() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: DOUGLAS H DURHAM P 01/13/2009