2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000113961

Entity Name: TROMBONE CHARLEYS, INC.

FILED Jan 28, 2007 Secretary of State

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

HIGH SPRINGS, FL 32643 US

Current Mailing Address: New Mailing Address:

4830 NW 43RD STREET

25 NE 1ST AVE APT. Q278 HIGH SPRINGS, FL 32643 US

GAINESVILLE, FL 32606 US

FEI Number: 42-1664318 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

LIPANI, WENDY 4830 NW 43RD STREET APT. Q278

GAINESVILLE, FL 32606 US

LIPANI, WENDY 391 SW FORTUNE WAY FORT WHITE, FL 32038 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: WENDY LIPANI 01/28/2007

> Electronic Signature of Registered Agent Date

> > Title:

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

(X) Change () Addition LIPANI, WENDY LIPANI, WENDY Name: Name: 4830 NW 43RD STREET APT. Q278 Address: 391 SW FORTUNE WAY Address:

City-St-Zip: GAINESVILLE, FL 32606 US City-St-Zip: FORT WHITE, FL 32038 US

Title: VΡ Title: VΡ (X) Change () Addition () Delete LIPANI, TODD Name:

Name: LIPANI, TODD 4830 NW 43RD STREET APT. Q278 Address: 391 SW FORTUNE WAY Address: GAINESVILLE, FL 32606 US FORT WHITE, FL 32038 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WENDY LIPANI PD 01/28/2007