

# 2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000115108

FILED  
Apr 22, 2012  
Secretary of State

**Entity Name:** COMANCHE CONSULTANCY INC.

**Current Principal Place of Business:**

4335 LYNX PAW TRAIL  
VALRICO, FL 33596 US

**New Principal Place of Business:**

**Current Mailing Address:**

4335 LYNX PAW TRAIL  
VALRICO, FL 33596 US

**New Mailing Address:**

FEI Number: 20-3872396

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSON, JESSE  
4335 LYNX PAW TRAIL  
VALRICO, FL 33596 US

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

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: JESSE JOHNSON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: NEALON, JAMES  
Address: 105 PINE COURT  
City-St-Zip: OLDSMAR, FL 34677 US

Title: D  
Name: SCALES, TAMMY  
Address: 4335 LYNX PAW TRAIL  
City-St-Zip: VALRICO, FL 33594 US

Title: D  
Name: JOHNSON, JESSE  
Address: 4335 LYNX PAW TRAIL  
City-St-Zip: VALRICO, FL 33594 US

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: JESSE L JOHNSON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

D

04/22/2012

\_\_\_\_\_  
Date