2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000115548

Entity Name: CELLRUNNERS DISTRIBUTION CORP.

FILED Nov 23, 2009 Secretary of State

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

2530 N POWERLINE RD 404

POMPANO BEACH, FL 33069

New Mailing Address: Current Mailing Address:

2530 N POWERLINE RD

POMPANO BEACH, FL 33069

FEI Number: 20-3320135 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:

COLAVECCHIO, JOHN COLAVECCHIO, JOHN 2530 N POWERLINE RD 1701 GREEN ROAD 404

SUITE H

POMPANO BEACH, FL 33069 US DEERFIELD BEACH, FL 33064 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: JOHN COLAVECCHIO 11/23/2009

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MOCARSKI, MATTHEW MOCARSKI, MATTHEW Name: Name: 2530 N POWERLINE RD #404 1701 GREEN ROAD SUITE H Address: Address: City-St-Zip:

POMPANO BEACH, FL 33069 City-St-Zip: DEERFIELD BEACH, FL 333064

Title: VΡ () Delete Title: (X) Change () Addition COLAVECCHIO, JOHN COLAVECCHIO, JOHN Name: Name: 2530 N POWERLINE RD #404 Address: 1701 GREEN ROAD SUITE H Address: POMPANO BEACH, FL 33069 DEERFIELD BEACH, FL 33064 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.

VΡ SIGNATURE: JOHN COLAVECCHIO 11/23/2009