2007 FOR PROFIT CORPORATION REINSTATEMENT

	INDITION	* •			_			
DOCUMENT # P05000127520							.ED	
1. Entity Name			16			1. 14	. <u> </u>	
LORD HOUSES, INC.						074404.00	_	
					ļ		PH 1:51	04 -
Principal Place of Business Mailing Address						FALLAHASS	(Grains	X
P.O. BOX 180904 P.O. BOX 180904 Tallahassee, Fl 32318 Tallahassee, Fl 32318			1Ω			TALLAHASS	EE, FLORIDA	7011
TALLATIASSEE, FC 32310 TALLATIASSEE, TC 32310			16					
2. Dissipal Flore of Florings No F.O. Boy # 2. Mailing Address								
2. Principal P	2. Principal Place of Business - No P.O. Box # 3. Mailing Address 1003 Tay for St.							
Suite, Apt. #, etc. Suite, Apt. #, etc.					05222007	REIN-P	CR2E098 (1/07)	
City & State	hassee, FL	City & State		4. FEI Numbe	er	⊢	plied For t Applicable	
^{Zip} 3=3		Zip	Country	,	5. Certificate	of Status Desired	\$8.75 Add	
	6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
IENIZING GUEDI				Name Sheri Jenkins				
JENKINS, SHERI 2416 MANZANITA COURT				Street Address (P.O. Box Number is Not Acceptable)				
TALLAHASSEE, FL 32303				1003 Taylor St.				
				City Zip Code_				
City Tall								310
8. 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. I am familiar with, and accept the obligations of registered agent.								
Mari Jankins 5/22/07								
SIGNATURE_	Signature, typed or printed name of registered agent a	and title if applicable (NOTE	: Registered	Agent signature requir	red when reinstating)		DATE	
FILE NOW!!! FEE IS \$300.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.								
10.	OFFICERS AND	DIRECTORS	11.		ADDIT!ONS	CHANGES TO OFFIC	EDS AND DIRECTORS	2 (8) 44
TITLE	OFFICERS AND	Delete Delete	TITLE		AUDITIONS/	CHANGES TO OFFIC	Change	Addition
NAME	JENKINS, BISHOP W	_ *****	NAME			0010390)62Ō3	
STREET ADDRESS CITY-ST-ZIP	2416 MANZANITA COURT TALLAHASSEE, FL 32303		STREET CITY-ST	ADDRESS 7 7 7 P	06/05	/0701028	-019 **300.	00
TITLE	0	☐ Delete	TITLE	1-211			☐ Change	Addition
NAME	JENKINS, CHRISTINE	□ Delette	NAME				Onlings	
STREET ADDRESS	2416 MANZANITA COURT			ADDRESS				İ
CITY-ST-ZIP	TALLAHASSEE, FL 32303	Пол	CITY-ST	1-2119			Change	C Addition
TITLE NAME	JENKINS, WALTER # 1	☐ Delete	TITLE NAME	100	2 Taul	n- St	≥ Change	☐ Addition
STREET ADDRESS	2416 MANZANITA COURT		1	ADDRESS	3 Taylo	32310		
CITY-ST-ZIP	TALLAHASSEE, FL 32303		CITY-ST	r-ziP \ \	all, The	363.0		
TITLE NAME	V JENKINS, SHERI	☐ Delete	TITLE NAME				Change	☐ Addition
STREET ADDRESS								
CITY-ST-ZIP	2416 MANZANITA COURT			ADDRESS \	3 Ta	ylor St.		
	· '			ADDRESS I C	3 Ta	ylor st. _ 32310		
TITLE	2416 MANZANITA COURT	☐ Delete	STREET CITY-ST	ADDRESS IC	03 Ta all Fl	ylor 5t. _ 32310	☐ Change	☐ Addition
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NAME	2416 MANZANITA COURT	☐ Delete	STREET . CITY-ST TITLE NAME	ADDRESS	03 Ta all Fl	ylor St. _ 32310	☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	2416 MANZANITA COURT	☐ Delete	STREET OF CITY-ST	ADDRESS	03 Ta all , Fl	ylor St. _ 32310	☐ Change	☐ Addition
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby	2416 MANZANITA COURT TALLAHASSEE, FL 32303	□ Delete this filling does not qualify for	STREET : CITY-ST TITLE NAME STREET : CITY-SI TITLE NAME STREET : CITY-SI CITY-SI	ADDRESS 1- ZIP ADDRESS 1- ZIP Ditions contained	I in Chapter 119	s, Florida Statutes. I fu	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby of indicated of the core	2416 MANZANITA COURT TALLAHASSEE, FL 32303	Delete this filling does not qualify for true and accurate and that newered to execute this report	STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST	ADDRESS 1-ZIP ADDRESS 1-ZIP Eptions contained to shall have the	I in Chapter 119 same legal effec), Florida Statutes. I fu t as if made under oat	☐ Change Ther certify that the inth; that I am an officer	Addition formation or director
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby of indicated of the core	2416 MANZANITA COURT TALLAHASSEE, FL 32303 Dertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empty. Or on an attachment with an address, where the control of the receiver or trustee empty.	Delete this filling does not qualify for true and accurate and that newered to execute this report	STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST	ADDRESS 1-ZIP ADDRESS 1-ZIP Eptions contained to shall have the	I in Chapter 119 same legal effec), Florida Statutes. I fu t as if made under oat	☐ Change Ther certify that the inth; that I am an officer	Addition formation or director Block 11 if