2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000156311

Entity Name: LIBERTY RECOVERY & TOWING, INC.

FILED Dec 12, 2006 Secretary of State

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

300 S DUNCAN AVENUE SUITE# 296B CLEARWATER, FL 33755

New Mailing Address: Current Mailing Address:

300 S DUNCAN AVENUE SUITE # 296B CLEARWATER, FL 33755

FEI Number: 20-3863530 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:

CARLSON, DAMON STRICKLAND, VICTORIA 300 S DUNCAN AVENUE 300 S DUNCÁN AVENUE SUITE # 296B SUITE # 296B CLEARWATER, FL 33755 US CLEARWATER, FL 33755 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: VICTORIA STRICKLAND 12/12/2006

> 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

CARLSON, DAMON STRICKLAND, VICTORIA Name: Name: 300 S DUNCAN AVENUE SUITE # 296B Address: 300 S DUNCAN AVENUE SUITE # 296B Address:

CLEARWATER, FL 33755 City-St-Zip: CLEARWATER, FL 33755 City-St-Zip:

() Delete Title: Title: () Change () Addition Name: SMOTHERS, RANDALL Name:

300 S DUNCAN AVENUE SUITE # 296B Address: Address: CLEARWATER, FL 33755 City-St-Zip: City-St-Zip:

() Delete SECT Title: (X) Change () Addition Title: SECT

STRICKLAND, VICTORIA J Name: STRICKLAND, MICHAEL Name:

300 S DUNCAN AVENUE SUITE # 296B 300 S DUNCAN AVENUE SUITE # 296B Address: Address:

City-St-Zip: CLEARWATER, FL 33755 City-St-Zip: CLEARWATER, FL 33755

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.

Ρ SIGNATURE: VICTORIA STRICKLAND 12/12/2006