2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000000213

Entity Name: AMARI KAI COMPANY

FILED Nov 10, 2009 Secretary of State

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

7107 MORNING DOVE LOOP W LAKELAND, FL 33809

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 1160 7107 MORNING DOVE LOOP W LAKELAND, FL 33809 LAKELAND, FL 33809

FEI Number: 20-4014857 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:

CASON, EDDIE L 7107 MORNING DOVE LOOP W LAKELAND, FL 33809

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: EDDIE L CASON

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

CASON, EDDIE L Name: Name: CASON, EDDIE L CEO 7107 MORNING DOVE LOOP W 7107 MORNING DOVE LOOP W Address: Address:

LAKELAND, FL 33809

City-St-Zip: LAKELAND, FL 33809 City-St-Zip:

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

EDDIE, CASON L TRES Name: Name: 7107 MORNING DOVE LOOP W Address: Address:

LAKELAND, FL 33809 City-St-Zip: City-St-Zip:

Title: Title: () Delete SEC () Change (X) Addition Name: VALBRUN, MAGALIE L SEC Name:

7107 MORNING DOVE LOOP W Address: Address:

City-St-Zip: City-St-Zip: LAKELAND, FL 33809

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.

SIGNATURE: EDDIE L CASON CEO 11/10/2009