2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000024336

Entity Name: CORE THEORIES, INC.

FILED Dec 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 450-106 SR 13 NORTH #114 JACKSONVILLE, FL 32259 **New Mailing Address: Current Mailing Address:** 450-106 SR 13 NORTH #114 JACKSONVILLE, FL 32259 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMOTRITSKY, MICHAEL 450-106 SR 13 NORTH JACKSONVILLE, FL, FL 32259 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: MICHAEL SMOTRITSKY 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: PRFS () Delete () Change () Addition PORTER, SCOTT B Name: Name: 450-106 SR 13 N #114 Address: Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: Title: **PRES** () Delete Title: () Change () Addition Name: SMOTRITISKY, MICHAEL Name: 450-106 SR 13 N #114 Address: Address: JACKSONVILLE, FL 32259 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.

SIGNATURE: SCOTT B PORTER **PRES** 12/17/2008