

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000094137

FILED
Oct 09, 2007
Secretary of State

Entity Name: EDGE-DYNAMIC HUMAN SOLUTIONS INC.

Current Principal Place of Business:

111 WAX MYRTLE LANE
LONGWOOD, FL 32779 US

New Principal Place of Business:

260 WEKIVA SPRINGS BLVD. STE 1080
LONGWOOD, FL 32779 US

Current Mailing Address:

111 WAX MYRTLE LANE
LONGWOOD, FL 32779 US

New Mailing Address:

260 WEKIVA SPRINGS BLVD. STE 1080
LONGWOOD, FL 32779 US

FEI Number: 20-5227687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUFORD, CLAUDE
111 WAX MYRTLE LANE
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

BUFORD, CLAUDE
260 WEKIVA SPRINGS BLVD. STE 1080
LONGWOOD, FL 32779 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: CLAUDE BUFORD

10/09/2007

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:

Title: P () Delete
Name: BUFORD, CLAUDE
Address: 111 WAX MYRTLE LANE
City-St-Zip: LONGWOOD, FL 32779 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BUFORD, CLAUDE
Address: 260 WEKIVA SPRINGS BLVD. STE 1080
City-St-Zip: LONGWOOD, FL 32779 US

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: CLAUDE BUFORD

MP

10/09/2007

Electronic Signature of Signing Officer or Director

Date