2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000095425

Entity Name: AT YOUR SERVICE OF ORLANDO, INC.

FILED Jun 10, 2008 Secretary of State

| - | | , | | | |
|---|---|--------------------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | | |
| | GABRIEL WA D, FL 32837 | Y US | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| | GABRIEL WA), FL 32837 | Y US | | | |
| FEI Number: | 20-5230712 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| 5436 SAN | , BURGOS GABRIEL WA O, FL 32837 | Y US | | | |
| | named entity e of Florida. | submits this statement for the | purpose of changing its registered | office or registered agent, or both, | |
| SIGNATUR | RE: ANNETT | E BURGOS | | | |
| | Electro | nic Signature of Registered Ag | gent | Date | |
| | | 3(2)(b), F.S., the corporation did r | not receive the prior notice. | | |
| | S AND DIREC | • , , | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P (BURGOS, ANN 5436 SAN GAE ORLANDO, FL | RIEL WAY | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: ANNETTE BURGOS P 06/10/2008