

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000101228

FILED
Aug 14, 2008
Secretary of State

Entity Name: EMERALD HEATING AND AIR, INC.

Current Principal Place of Business:

1141 GLYNLEA RD
JACKSONVILLE, FL 32216

New Principal Place of Business:

791 ASSISI LN
SUITE #2104
ATLANTIC BEACH, FL 32233

Current Mailing Address:

1141 GLYNLEA RD
JACKSONVILLE, FL 32216

New Mailing Address:

791 ASSISI LN
SUITE #2104
ATLANTIC BEACH, FL 32233

FEI Number: 26-0385463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHBACK, ROBERT H JR.
3322 ATLANTIC BLVD
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

IRELAND-FLYNN, LISA
791 ASSISI LN
SUITE #2104
ATLANTIC BEACH, FL 32233 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: LISA IRELAND-FLYNN

08/14/2008

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: D (X) Delete
Name: LEWISON, HAROLD
Address: 1141 GLYNLEN RD
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: FLYNN, TIM
Address: 1141 GLYNLEA RD
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DPST (X) Change () Addition
Name: FLYNN, TIM
Address: 791 ASSISI LN., SUITE #2104
City-St-Zip: ATLANTIC BEACH, FL 32233

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: TIM FLYNN

P

08/14/2008

Electronic Signature of Signing Officer or Director

Date