## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000110410

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FILED Oct 05, 2007 Secretary of State

Entity Name: STRATIX FINANCIAL GROUP INC.	
Current Principal Place of Business:	New Principal Place of Business:
2300 TALL PINES DR #120 LARGO, FL 33771	2300 TALL PINES DR #120 LARGO, FL 33771 US
Current Mailing Address:	New Mailing Address:
2300 TALL PINES DR #120 LARGO, FL 33771	2300 TALL PINES DR #120 LARGO, FL 33771 US
FEI Number: 20-5438859 FEI Number Applied For ( ) FEI N	Number Not Applicable ( ) Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
MELCER, MARY H 14133 SPOONBILL DRIVE CLEARWATER, FL 33762 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: MARY H. MELCER	
Electronic Signature of Registered Agent	Date
In accordance with s. 607.193(2)(b), F.S., the corporation did not receiv Election Campaign Financing Trust Fund Contribution ( ).	re the prior notice.
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title:         D ( ) Delete           Name:         MELCER, MARY           Address:         8550 ULMERTON RD.           City-St-Zip:         LARGO, FL 33771	Title: O/D (X) Change ( ) Addition Name: MELCER, MARY H Address: 2300 TALL PINES DRIVE #120 City-St-Zip: LARGO, FL 33771 US
Title: ( ) Delete Name: Address: City-St-Zip:	Title: O ( ) Change (X) Addition  Name: DAWSON, CLIFF B  Address: 2300 TALL PINES DRIVE #120  City-St-Zip: LARGO, FL 33771 US
Title: ( ) Delete Name: Address: City-St-Zip:	Title: O/D ( ) Change (X) Addition Name: MALONE, MICHAEL F Address: 2300 TALL PINES DRIVE #120 City-St-Zip: LARGO, FL 33771 US
Title: ( ) Delete Name: Address: City-St-Zip:	Title: D ( ) Change (X) Addition Name: WEIL, DAVID A Address: 14100 WALSINGHAM ROAD #36-145 City-St-Zip: LARGO, FL 33774

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: MARY H. MELCER O/D 10/05/2007