2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000121193

Entity Name: INTERNATIONAL MILITARY LOGISTICS, INC.

FILED Oct 02, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5722 S. FLAMI STE. 159 COOPER CITY					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
5722 S. FLAMINGO ROAD STE. 159 COOPER CITY, FL 33330					
FEI Number: 11-3	3758447	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
MUELLER, RICHARD 5722 S. FLAMINGO ROAD STE. 159 COOPER CITY, FL 33330 US			5722 S. FLAMINGO R STE. 159	SLYKERMAN, JAMES P 5722 S. FLAMINGO ROAD STE. 159 COOPER CITY, FL 33330 US	
The above name in the State of F		ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:	JAMES P.	SLYKERMAN		10/02/2008	
	Electronic	Signature of Registered Age	ent	Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: DIE	· ()[Delete	Title:	() Change () Addition	

Title: DIR () Delete Title: () Change () Addition Name: LONGWOOD, DEAN Name: Address: 5722 S. FLAMINGO ROAD Address:

Address: 5722 S. FLAMINGO ROAD Address: City-St-Zip: COOPER CITY, FL 33330 City-St-Zip:

Title: DIR () Delete Title: SDIR (X) Change () Addition

Name: MUELLER, RICHARD Name: VAN ZANT, JOEY

Address: 5722 S. FLAMINGO ROAD Address: 5722 S. FLAMINGO ROAD, #159
City-St-Zip: COOPER CITY, FL 33330 City-St-Zip: COOPER CITY, FL 33330

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: DEAN LONGWOOD DIR 10/02/2008