2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000015838

Entity Name: JLS EAST, INC.

FILED Feb 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4502 35TH STREET SUITE 500 ORLANDO, FL 32811

New Mailing Address: Current Mailing Address:

4502 35TH STREET SUITE 500 ORLANDO, FL 32811

FEI Number: 20-8463474 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SLYSTER, JOHN BIRBALL, ANITA 4502 35TH STREET 4502 35TH STREET SUITE 500 SUITE 500 OLRANDO, FL 32811 US OLRANDO, FL 32811 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: ANITA BIRBALL 02/17/2009

> 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:

ORLANDO, FL 32811

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SLYSTER, JOHN Name: Name: BIRBALL, ANITA 4502 35TH STREET SUITE 500 4502 35TH STREET SUITE 500 Address: Address:

City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32811

VΡ Title: VΡ (X) Change () Addition Title: () Delete Name: JOHNSON, KEVIN Name: JOHNSON, KEVIN E

4502 35TH STREET SUITE 500 4502 35TH STREET SUITE 500 Address: Address:

ORLANDO, FL 32811 ORLANDO, FL 32811 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete SLYSTER, DONNA LAUX, ANTHONY J Name: Name:

44502 35TH STREET SUITE 500 44502 35TH STREET SUITE 500 Address: Address:

City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32811

Title: () Delete Title:

(X) Change () Addition LAUX, ANTHONY JOHNSON, KEVIN E Name: Name: Address: 4502 35TH STREET SUITE 500 Address: 4502 35TH STREET SUITE 500

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.

City-St-Zip:

ORLANDO, FL 32811

Ρ SIGNATURE: ANITA BIRBALL 02/17/2009