2010 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 27, 2010
Secretary of State

DOCUMENT# P07000020101

Entity Name: CAREONE INSURANCE INC.

Current Principal Place of Business:

4300 N UNIVERSITY DR
E-106
LAUDERHILL, FL 33351

New Principal Place of Business:

3495 N HIATUS ROAD
201
SUNRISE, FL 33351

Current Mailing Address:

4300 N UNIVERSITY DR
E-106
LAUDERHILL, FL 33351

New Mailing Address:

3495 N HIATUS ROAD
201
SUNRISE, FL 33351

FEI Number: 20-8444564 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SILVERSTEIN, STEVEN
4300 N UNIVERSITY DR
E-106
LAUDERHILL, FL 33351 US

Name and Address of New Registered Agent:

SILVERSTEIN, STEVEN P
3495 N HIATUS ROAD
201
SUNRISE, FL 33351 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: STEVEN SILVERSTEIN 10/27/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: SILVERSTEIN, STEVEN P
Address: 3495 N HIATUS ROAD #201
City-St-Zip: SUNRISE, FL 33351

I hereby 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 all other like empowered.

SIGNATURE: STEVEN SILVERSTEIN P 10/27/2010
Electronic Signature of Signing Officer or Director Date