## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000026328

Entity Name: PLATFORM DESIGN, INC.

FILED Nov 24, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principa	al Place of Business:	New Principal Place of Business:

455 DOUGLAS AVE. 999 DOUGLAS AVE.

2255-L SUITE 3323

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

455 DOUGLAS AVE. 999 DOUGLAS AVE.

2255-L SUITE 3323

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 US

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

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

MOORE, BEAU K
3109 OAK ALLEY DR.
APOPKA, FL 32703 US
RAGSDALE, CARY
481 ALEXANDER DRIVE
DELTONA, FL 32725 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: CARY RAGSDALE 11/24/2008

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

 Name:
 MOORE, BEAU
 Name:
 MOORE, BEAU

 Address:
 3109 OAK ALLEY DR.
 Address:
 3109 OAK ALLEY DR.

 City-St-Zip:
 APOPKA, FL 32703 US
 City-St-Zip:
 APOPKA, FL 32703 US

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

Name: Name: ROSA, HECTOR

Address: 208 WEST SWEETWATER
City-St-Zip: City-St-Zip: LONGWOOD, FL 32779

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: BEAU MOORE MGR 11/24/2008