

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000040681

Entity Name: MURPHY3 INC.

FILED
Nov 30, 2008
Secretary of State

Current Principal Place of Business:

4872 CYPRESS WOODS DRIVE
APT 323
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 616141
ORLANDO, FL 32861

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, BENJAMIN I JR
4872 CYPRESS WOODS DRIVE
APT 323
ORLANDO, FL 32811 US

Name and Address of New Registered Agent:

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: BENJAMIN MURPHY

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
Name: MURPHY, BENJAMIN I JR
Address: 8472 CYPRESS WOODS DRIVE
City-St-Zip: ORLANDO, FL 32811

Title: VP () Delete
Name: MURPHY, GLADYS W
Address: 370 PARKWAY STREET
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BENJAMIN MURPHY

P

11/30/2008

Electronic Signature of Signing Officer or Director

Date