

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000041671

FILED  
Oct 10, 2008  
Secretary of State

Entity Name: M&U ASSOCIATE INTERNATIONAL INC

## Current Principal Place of Business:

3015 NW PINE ISLAND ROAD STE # 113-418  
CAPE CORAL, FL 33991

## New Principal Place of Business:

13018 MOODY RIVER PKWY  
NORTH FORT MYERS, FL 33903

## Current Mailing Address:

3015 NW PINE ISLAND ROAD STE # 113-418  
CAPE CORAL, FL 33991

## New Mailing Address:

13018 MOODY RIVER PKWY  
NORTH FORT MYERS, FL 33903

FEI Number: 80-0208048

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MCLAWRENCE, URSULA  
1916 SW 27TH TERRACE  
CAPE CORAL, FL 33914 US

## Name and Address of New Registered Agent:

MCLAWRENCE, URSULA  
13018 MOODY RIVER PARKWAY  
NORTH FORT MYERS, FL 33903 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: URSULA MCLAWRENCE

10/10/2008

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  
Name: MCLAWRENCE, URSULA  
Address: 1916 SW 27TH TERRACE  
City-St-Zip: CAPR CORAL, FL 33914

Title: V ( ) Delete  
Name: MACFARLANE, DEAN  
Address: 1916 SW 27TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33914

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MCLAWRENCE, URSULA  
Address: 13018 MOODY RIVER PARKWAY  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: VP (X) Change ( ) Addition  
Name: MACFARLANE, DEAN  
Address: 13018 MOODY RIVER PARKWAY  
City-St-Zip: NORTH FORT MYERS, FL 33903

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: URSULA MCLAWRENCE

PRES

10/10/2008

Electronic Signature of Signing Officer or Director

Date