2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000081648

Entity Name: WILLY'S LAWN CARE & LANDSCAPING INC.

FILED Oct 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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320 SW 70 TERRACE PEMBROKE PINES, FL 33023

Current Mailing Address: New Mailing Address:

320 SW 70 TERRACE PEMBROKE PINES, FL 33023

FEI Number: 26-0539194 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WATTS, JAMES WATTS, JAMES 8964 STATE RIAD 84 8964 STATE ROAD 84 DAVIE, FL 33021 US DAVIE, FL 33021 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: JAMES WATTS 10/27/2008

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 VELASCO, WILFREDO
 Name:
 VELASCO, WILFREDO H

 Address:
 320 SW 70 TERR
 Address:
 320 SW 70 TERR

City-St-Zip: PEMBROKE PINES, FL 33023 City-St-Zip: PEMBROKE PINES, FL 33023

Title: V () Delete Title: V (X) Change () Addition Name: VELASCO, JOSE Name: VELASCO, JOSE F

Address: 680 HAYES ST Address: 6580 HAYES ST

City-St-Zip: HOLLYWOOD, FL 33024 City-St-Zip: HOLLYWOOD, FL 33024

Title: T () Delete Title: T (X) Change () Addition
Name: DUBAR-VELASCO, ANNA KAMLA NAMe: DUBAR-VELASCO, KAMLA ANNA

Address: 320 SW 70 TERRACE Address: 320 SW 70 TERRACE

City-St-Zip: PEMBROKE PINES, FL 33023 City-St-Zip: PEMBROKE PINES, FL 33023

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: KAMLA ANNA DUBAR-VELASCO T 10/27/2008