2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 30, 2011
Secretary of State

DOCUMENT# P07000088289

Entity Name: IDEAL INSURANCE SOLUTIONS, INC

Current Principal Place of Business:

441 S. STATE ROAD 7
19B
MARGATE, FL 33068

New Principal Place of Business:

Current Mailing Address:

441 S. STATE ROAD 7
STE 19B
MARGATE, FL 33068

New Mailing Address:

FEI Number: 26-0651584 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOEL, WOODSIDE
441 S. STATE ROAD 7
STE 19B
MARGATE, FL 33309 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: WOODSIDE NOEL

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: NOEL, WOODSIDE
Address: 441 S. STATE ROAD 7
City-St-Zip: MARGATE, FL 33068

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: WOODSIDE NOEL P 04/30/2011

Electronic Signature of Signing Officer or Director — Date