2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000097928

Entity Name: MIXED MEDIA MARKETING INC.

FILED Oct 22, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Finicipal Flace of Business.	New Fillicipal Flace Of Busiliess

528 SOUTH 8TH ST

UNIT D

FERNANDINA BEACH, FL 32034 US

Current Mailing Address: New Mailing Address:

528 SOUTH 8TH ST UNIT D

FERNANDINA BEACH, FL 32034 US

FEI Number: 26-0855480 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:

CARVALHO, JOHN L
726 S 12TH STREET
95017 TWIN OAKS LANE
FEDNIANDINA BEACH ELEL

FERNANDINA BEACH, FL FL US FERNANDINA BEACH, FL FL 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: JOHN CARVALHO 10/22/2009

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: PRES () Delete Title: PRES (X) Change () Addition Name: CARVALHO, JOHN L Name: CARVALHO, JOHN L

 Name:
 CARVALHO, JOHN L
 Name:
 CARVALHO, JOHN L

 Address:
 726 S 12TH STREET
 Address:
 95017 TWIN OAKS LANE

 City-St-Zip:
 FERNANDINA BEACH, FL 32034
 City-St-Zip:
 FERNANDINA BEACH, FL 32034

Title: S () Delete Title: S (X) Change () Addition
Name: BATEMAN. BRANDY Name: BATEMAN. BRANDY

Address: 726 S. 12TH ST Address: 95017 TWIN OAKS LANE
City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034

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

 Name:
 CARVALHO, ROSS
 Name:

 Address:
 3165 1ST AVE, APT 19
 Address:

 City-St-Zip:
 FERNANDINA BEACH, FL 32034
 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: JOHN L CARVALHO PRES 10/22/2009