2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000123113

Entity Name: AAA BILLING SERVICES, INC.

FILED Nov 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

175 FONTAINEBLEAU BLVD STE 1R1 13010 NW 1 STREET 102

MIAMI, FL 33172

PEMBROKE PINES, FL 33028

Current Mailing Address: New Mailing Address:

175 FONTAINEBLEAU BLVD STE 1R1 13010 NW 1 STREET 102

MIAMI, FL 33172

PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 26-1419616 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MARTINEZ, AILE MARTINEZ, AILE 175 FONTÁINEBLEAU BLVD STE 1R1 13010 NW 1 STREET

MIAMI, FL 33172 US PEMBROKE PINES, FL 33028 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: AILE MARTINEZ 11/05/2009

> 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:

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

MARTINEZ, AILE MARTINEZ, AILE Name: Name:

175 FONTAINEBLEAU BLVD STE 1R1 Address: 13010 NW 1 STREET 102 Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: PEMBROKE PINES, FL 33028

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

Name: MARTINEZ, LAZARO Name: MARTINEZ, LAZARO 175 FONTAINEBLEAU BLVD STE 1R1 Address: 13010 NW 1 STREET 102 Address: PEMBROKE PINES, FL 33028 MIAMI, FL 33172 City-St-Zip: 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: AILE MARTINEZ PD 11/05/2009