## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000126771

Entity Name: DERMA GOLD DISTRIBUTORS II

FILED Dec 05, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
SUITE #10	TH UNIVERSI <sup>*</sup> 97 5, FL 33321	TY DRIVE			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
SUITE #10	TH UNIVERSI <sup>*</sup> 97 9, FL 33321	TY DRIVE			
FEI Number	: 33-1192599	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:	
810 SOUT PLANTATI		.D.7 US	ourpose of changing its registered	d office or registered agent, or both	
	e oi Fiorida.	domina this statement for the	p	domice of registered agent, or both,	
SIGNATU		JS-HOOD LISA	g g g	a office of registered agent, or both,	
SIGNATU	RE: METELLU			Date	
In accordan Election Car	RE: METELLU Electron ce with s. 607.193 npaign Financing	JS-HOOD LISA ic Signature of Registered Ag B(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ent ot receive the prior notice.	Date	
In accordan Election Car	RE: METELLU Electron ce with s. 607.19	JS-HOOD LISA ic Signature of Registered Ag B(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ent ot receive the prior notice.		
In accordan Election Car	RE: METELLU Electron ce with s. 607.193 npaign Financing S AND DIREC	JS-HOOD LISA ic Signature of Registered Ag B(2)(b), F.S., the corporation did no Trust Fund Contribution ( ). FORS: Delete HABEL R H COURT	ent ot receive the prior notice.	Date	

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: HERNANDEZ R. MABEL P 12/05/2008