

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000129307

**Entity Name:** 141 CAPITAL, INC.

**FILED**  
**May 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1585 ELLINWOOD ST  
SUITE 214  
DES PLAINES, IL 60016

**New Principal Place of Business:**

2670 E SUNRISE BLD  
SUITE 434  
FT LAUDERDALE, FL 33304

**Current Mailing Address:**

1585 ELLINWOOD ST  
SUITE 214  
DES PLAINES, IL 60016

**New Mailing Address:**

340 OLD HAW CREEK RD  
ASHEVILLE, NC 28805

**FEI Number:** 26-1152530

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCorp SERVICES INC  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: JOSIE SORENSEN OBO INCORP SERVICES INC.

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: STONE, ERROL M  
Address: 340 OLD HAW CREEK RD  
City-St-Zip: ASHEVILLE, NC 28805 US

Title: CHM  
Name: STRICKLAND, PAUL D JR  
Address: 442 ALLES  
City-St-Zip: DES PLAINES, IL 60016 US

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: ERROL STONE

CEO

05/07/2012

Electronic Signature of Signing Officer or Director

Date