## **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000039109

Entity Name: BEST PRACTICE INSTITUTE, INC

FILED Sep 30, 2011 Secretary of State

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

108 EAGLETON LANE 410 EVERNIA STREET

PALM BEACH GARDENS, FL 33418 US 112

WEST PALM BEACH, FL 33401 US

Current Mailing Address: New Mailing Address:

108 EAGLETON LANE 410 EVERNIA STREET

PALM BEACH GARDENS, FL 33418 US 112 WEST PALM BEACH, FL 33401 US

FEI Number: 26-2443147 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:

CARTER, LOUIS
749 US HIGHWAY 1 SUITE 204

CARTER, LOUIS
410 EVERNIA STREET

NORTH PALM BEACH, FL 33408 US WEST PALM BEACH, FL 33401 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: LOUIS L CARTER 09/30/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: MR

Name: CARTER, LOUIS Address: 410 EVERNIA STREET

City-St-Zip: WEST PALM BEACH, FL 33401 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: LOUIS L CARTER MR 09/30/2011