

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000045431

Entity Name: GOT CELL HEALTH, INC.

FILED
Nov 24, 2009
Secretary of State

Current Principal Place of Business:

1570 GRANDE CULL WAY
JUPITER, FL 33458

New Principal Place of Business:

278 CARAVELLE DRIVE
JUPITER, FL 33458

Current Mailing Address:

1570 GRANDE CULL WAY
JUPITER, FL 33458

New Mailing Address:

278 CARAVELLE DRIVE
JUPITER, FL 33458

FEI Number: 80-0189171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAW, MATT
1570 GRANDE CULL WAY
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

SHAW, MATT
278 CARAVELLE DRIVE
JUPITER, FL 33458 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: MATT SHAW

11/24/2009

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: PST () Delete
Name: SHAW, MATT
Address: 1570 GRANDE CULL WAY
City-St-Zip: JUPITER, FL 33458

Title: V () Delete
Name: SHAW, KATE M
Address: 1570 GRANDE CULL WAY
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: SHAW, MATT
Address: 278 CARAVELLE DRIVE
City-St-Zip: JUPITER, FL 33458

Title: V (X) Change () Addition
Name: SHAW, KATE M
Address: 278 CARAVELLE DRIVE
City-St-Zip: JUPITER, FL 33458

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: MATT SHAW

PRES

11/24/2009

Electronic Signature of Signing Officer or Director

Date