2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000062475

MCGUIRL, BÈN

MIAMI, FL 33143

7820 SW 55 AVENUE, APT.D

Name:

Address:

City-St-Zip:

Entity Name: ENVI MIAMI INC

FILED Oct 05, 2009 Secretary of State

| Entity Nar | me: ENVINIA | MITING. | | | | | |
|---|--|---------------------------------------|---|--|--------------------------|--------------|--|
| Current Principal Place of Business: | | | New Prince | New Principal Place of Business: | | | |
| 10 S.W. SOMIAMI, FL | | DRIVE UNIT 703 | | | | | |
| Current M | lailing Addres | ss: | New Maili | New Mailing Address: | | | |
| 10 S.W. SOUTH RIVER DRIVE UNIT 703 MIAMI, FL 33130 | | | 3326 MARY STREET 301 MIAMI, FL 33133 | | | | |
| FEI Number: | 26-2862286 | FEI Number Applied For () | FEI Number Not Appl | icable () | Certificate of Status De | sired () | |
| Name and | Address of C | Current Registered Agent: | Name and | Name and Address of New Registered Agent: | | | |
| ADAMS, JA 10 S.W. SO MIAMI, FL | OUTH RIVER | DRIVE UNIT 703 | | | | | |
| | named entity : e of Florida. | submits this statement for the | purpose of changing i | ts registered offi | ce or registered age | nt, or both, | |
| SIGNATUR | RE: JASON A | DAMS | | | | | |
| | Electror | nic Signature of Registered Ag | ent | | Date | | |
| | | 3(2)(b), F.S., the corporation did no | ot receive the prior notic | e. | | | |
| | S AND DIREC | • , , | ADDITION | IS/CHANGES T | O OFFICERS AND | DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | ADAMS, JASOI | HRIVER DRIVE UNIT 703 | Title: Name: Address: City-St-Zip: | ()C | hange () Addition | | |
| Title: Name: Address: City-St-Zip: | S (SCHRIEBER, N 5304 S. LE JEI CORAL GABLE | JNE ROAD | Title: Name: Address: City-St-Zip: | S (X) C SCHRIEBER, MAI 185 SW 7TH STR MIAMI, FL 33130 | EET UNIT 3706 | | |
| Title: Name: Address: City-St-Zip: | T (STRANG, MAX 4080 SW 37TH CORAL GABLE | | Title: Name: Address: City-St-Zip: | ()C | hange () Addition | | |
| Title: | V (|) Delete | Title: | () C | hange () Addition | | |

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JASON ADAMS P 10/05/2009