## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P08000066913

Entity Name: KM BODY BOUTIQUE, INC.

FILED Nov 17, 2009 Secretary of State

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

208 S OLIVE AVE

W PALM BEACH, FL 33401 US

Current Mailing Address: New Mailing Address:

208 S OLIVE AVE

W PALM BEACH, FL 33401 US

FEI Number: 26-2564659 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NUNNALLY, KIMBERLY
534 OLIVE TREE CIR

NUNNALLY, KIMBERLY
208 S OLIVE AVE

GREENACRES, FL 33413 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: KIMBERLY NUNNALLY 11/17/2009

Electronic Signature of Registered Agent 11/17/2009

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete Title: PRES (X) Change ( ) Addition
Name: NUNNALLY, KIMBERLY
Address: 534 OLIVE TREE CIR
Address: 534 OLIVE TREE CIR

 Address:
 534 OLIVE TREE CIR
 Address:
 534 OLIVE TREE CIR

 City-St-Zip:
 GREENACRES, FL 33413 US
 City-St-Zip:
 GREENACRES, FL 33413 US

Title: SD () Delete Title: SEC (X) Change () Addition Name: NUNNALLY, MICHELLE Name: NUNNALLY, MICHELLE

Address: 1675 BRENTWOOD X-ING
City-St-Zip: CONYERS, GA 30013 US

Name: NONNALLY, MICHELLE
Address: 1675 BRENTWOOD X-ING
City-St-Zip: CONYERS, GA 30013 US

City-St-Zip: CONYERS, GA 30013 US

Title: TD ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 NUNNALLY, E PATRICK
 Name:
 NUNNALLY, E PATRICK

 Address:
 1675 BRENTWOOD X-ING
 Address:
 1675 BRENTWOOD X-ING

 City-St-Zip:
 CONYERS, GA 30013 US
 City-St-Zip:
 CONYERS, GA 30013 US

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: KIMBERLY M NUNNALLY PRES 11/17/2009