

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000094691

Entity Name: VERSAEMERGE INC.

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

566 SOUTHWEST SAINT MARTINS COVE  
PORT ST. LUCIE, FL 34986

**New Principal Place of Business:**

5517 NW SCEPTER DR  
PORT ST. LUCIE, FL 34983

**Current Mailing Address:**

566 SOUTHWEST SAINT MARTINS COVE  
PORT ST. LUCIE, FL 34986

**New Mailing Address:**

213 WEST 35TH ST #802A  
C/O PADELL BUSINESS MANAGEMENT INC  
NEW YORK, NY 10001

FEI Number: 26-3580434

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MARTONE, ANTHONY  
566 SOUTHWEST SAINT MARTINS COVE  
PORT ST. LUCIE, FL 34986 US

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

HARNAGE, BLAKE  
5517 NW SCEPTER DRIVE  
PORT ST. LUCIE, FL 34983 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: BLAKE HARNAGE

01/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: HARNAGE, BLAKE  
Address: 5517 NW SCEPTER DRIVE  
City-St-Zip: PORT ST. LUCIE, FL 34983

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: BLAKE HARNAGE

PRES

01/06/2011

Electronic Signature of Signing Officer or Director

Date