

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000070946

Entity Name: AT HIS COST, INC.

**FILED**  
**Oct 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3854 NW 89TH WAY  
HOLLYWOOD, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

3854 NW 89TH WAY  
HOLLYWOOD, FL 33024

**New Mailing Address:**

FEI Number: 80-0638040

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUTLER, JAMES L JR  
3854 NW 89TH WAY  
HOLLYWOOD, FL 33024 US

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

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: JAMES L. BUTLER JR.

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: BUTLER, JAMES L SR.  
Address: 3854 NW 89TH WAY  
City-St-Zip: HOLLYWOOD, FL 33024

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: JAMES L. BUTLER SR.

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DPS

10/11/2011

\_\_\_\_\_  
Date