

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P12000036330

Entity Name: LIZBETH PUBLISHING INC.

**FILED**  
**Apr 14, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

14095 43RD RD  
LOXAHATCHEE, FL 33470 US

**New Principal Place of Business:**

**Current Mailing Address:**

14095 43RD RD  
LOXAHATCHEE, FL 33470 US

**New Mailing Address:**

FEI Number: 45-5174799

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MAXWELL, ELIZABETH  
14095 43RD RD  
LOXAHATCHEE, FL 33470 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: ELIZABETH MAXWELL

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTSD  
Name: MAXWELL, ELIZABETH  
Address: 14095 43RD RD  
City-St-Zip: LOXAHATCHEE, FL 33470 US

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: ELIZABETH MAXWELL

PTSD

04/14/2014

Electronic Signature of Signing Officer or Director

Date