2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P12000050423

Entity Name: ADZUA ART ASSOCIATES INC.

FILED Jan 02, 2014 Secretary of State

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

2 PINE CONE DR 66 BURBANK DR

PALM COAST, FL 32164 PALM COAST, FL 32137 UN

Current Mailing Address: New Mailing Address:

PO BOX 354059 PO BOX 354059

PALM COAST, FL 32135 PALM COAST, FL 32135 UN

FEI Number: 45-5095531 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:

JACKSON, ARTHUR 1 FLORIDA PARK DR SOUTH STE 330 PALM COAST, FL 32137 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: ARTHUR JACKSON

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: SOLOMON, BARBARA Address: PO BOX 354059

City-St-Zip: PALM COAST, FL 32135 UN

Title: V

Name: SOLOMON, KATE Address: PO BOX 350444

City-St-Zip: PALM COAST, FL 32135 UN

Title: 7

Name: SOLOMON, BARBARA Address: PO BOX 354059

City-St-Zip: PALM COAST, FL 32135 UN

Title: SEC

 Name:
 SOLOMON, BARBARA

 Address:
 PO BOX 354059

 City-St-Zip:
 PALM COAST, FL 32135 UN

Title: FIN

Name: SOLOMON, BARBARA Address: PO BOX 354059

City-St-Zip: PALM COAST, FL 32135 UN

Title: COR

Name: SOLOMON, BARBARA Address: PO BOX 354059

City-St-Zip: PALM COAST, FL 32135 UN

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: BARBARA SOLOMON CEO 01/02/2014