2008 FOR PROFIT CORPORATION REINSTATEMENT

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DOCUMENT # P93000058155						FILED				
Entity Name				08 OCT 27 PM 1:19						
J.C. CLAS			\	nct 27	All 1. 12					
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Principal Place		Mailing Address			51	FYAHASSE	F' LFOIL			
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Principal Place of Business - No P.O. Box # 3. Mailing Address										
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		·			10132008	REIN-P	CR2E098 (1/07)		
City & State City & State					4. FEI Number			oplied For		
Brooksville, FL 34609 Brooksville,				·		42		lot Applicable		
Zip				Country 5. Certificat			□ \$8.75 A			
3460			 -				Fee Requir	ed		
6. Name and Address of Current Registered Agent Name						dress of New K	egistered Agent			
					Joann Bellone					
12201 U.S.			Street	Address (P.O. Box Number is	Not Acceptable)			
BAYONET I	POINT, FL 34667									
				1	15010 Sur	reybend				
			City			•	FL Zip Co	de		
8 The above r	named entity submits this statement for	The number of changing its	registered office (or recrieter	Brooksvil	1.E				
the obligation	one of registered agent.	tile pulgdsti di changing its	registated office t	n iegisici	red agent, or oour, r					
SIGNATURE Jolon / Sellne 10.23.08										
SIGNATURE Signature typed or printed name of registered agent and site if epplicable. (NOTE: Registered Agent signature required when reinstating) DATE										
Signifilized typed or printed name of registered agent and site if applicable. (NOTE; Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$750.00										
	uary 1, 2009, Fee will be \$900.00	0								
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