

2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P93000066824

Entity Name: CARSTENS INC.

FILED
Nov 20, 2014
Secretary of State

Current Principal Place of Business:

929 TRUMAN
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

815 PEACOCK PLAZA
KEY WEST, FL 33040

New Mailing Address:

P.O. BOX 669004
A-166
MIAMI SPRINGS, FL 33266

FEI Number: 65-0439507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSON, THOMAS
815 PEACOCK PLAZA
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

OLSON, THOMAS
929 TRUMAN
KEY WEST, FL 33040 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: THOMAS W OLSON

11/20/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: OLSON, THOMAS W.
Address: P.O. BOX 669004
City-St-Zip: MIAMI SPRINGS, FL 33266

Title: VP
Name: OLSON, ALMA
Address: P.O. BOX 669004
City-St-Zip: MIAMI SPRINGS, FL 33266

Title: TR
Name: MARGARITA, OLSON E
Address: 477 DROST DR
City-St-Zip: CUDJOE KEY, FL 33042

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: THOMAS W OLSON

PRES

11/20/2014

Electronic Signature of Signing Officer or Director

Date