## 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000022144

Entity Name: PAULA ALLEN HOLDINGS, INC.

FILED Sep 20, 2006 Secretary of State

| Entity Na   | me: PAULA/                      | ALLEN HOLDINGS, INC.            |   |  |  |
|---|---------------------------------|---------------------------------|---|--|--|
| Current Principal Place of Business:  |                                 |                                 | New Principal Place                         | New Principal Place of Business:             |  |
| SUITE 410   | E LUCIEN DR<br>)<br>D, FL 32571 |                                 |   |  |  |
| Current Mailing Address:  |                                 |                                 | New Mailing Addres                          | New Mailing Address:                         |  |
| SUITE 410   | E LUCIEN DR<br>)<br>D, FL 32571 |                                 |   |  |  |
| FEI Number  | : 59-3310809                    | FEI Number Applied For ( )      | FEI Number Not Applicable ( )               | Certificate of Status Desired (X)            |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |                                 |                                 |   |  |  |
| SUITE 410<br>MAITLANI   | E LUCIEN DR<br>)<br>D, FL 32571 | JS                              |   |  |  |
|   | e named entity<br>e of Florida. | submits this statement for the  | purpose of changing its registere           | ed office or registered agent, or both,      |  |
| SIGNATUI  | RE: STEVE I                     | LERCH                           |   |  |  |
|   | Electro                         | nic Signature of Registered Ag  | ent   | Date   |  |
| Election Ca   | mpaign Financir                 | ng Trust Fund Contribution ( ). |   |  |  |
| OFFICERS AND DIRECTORS:   |                                 |                                 | ADDITIONS/CHANG                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | MULLARKEY,                      | JCIEN DR SUITE 410              | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | LERCH, STEV                     | ICIEN DR SUITE 410              | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVE LERCH CFO 09/20/2006