2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000056642

Entity Name: BAR-J.P. INC.

FILED Nov 25, 2008 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

4700 NW BOCA RATON BLVD STE 104 BOCA RATON, FL 334314860 US

Current Mailing Address: New Mailing Address:

PO BOX 160278 222 SOUTH BROADWAY #2 BIG SKY, MT 59716 US BELGRADE, MT 59714 US

FEI Number: 65-0681998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SCHWARTZ, ROBERT M 4700 NW BOCA RATON BLVD, SUITE 104

4700 NW BOCA RATON BLVD, SUITE 104 BOCA RATON, FL 334314860 US BOCA RATON, FL 334314860 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.

PARISER, PAUL S

SIGNATURE: PAUL S. PARISER 11/25/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete () Change () Addition

PARISER, PAUL S Name: Name: PO BOX 160278 Address: Address: City-St-Zip: BIG SKY, MT 59716 City-St-Zip:

() Delete Title: **VPST** Title: () Change () Addition

Name: REID. LUCIE S Name: PO BOX 160278 Address: Address: BIG SKY, MT 59716 City-St-Zip: City-St-Zip:

Title: Title: VCON () Delete () Change () Addition

PARISER, BENJAMIN S Name: Name: 1600 DEXTER AVE N STE B2 Address: Address: City-St-Zip: SEATTLE, WA 98109 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: PAUL S. PARISER 11/25/2008