

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000083417

Entity Name: ENVIROLAB, INC.

FILED
Sep 28, 2009
Secretary of State

Current Principal Place of Business:

15445 N. NEBRASKA AVE.
LUTZ, FL 33549

New Principal Place of Business:

1641 LAND O' LAKES BLVD
LAND O' LAKES, FL 33549

Current Mailing Address:

P.O. BOX 1952
LUTZ, FL 335481952

New Mailing Address:

1641 LAND O' LAKES BLVD
LAND O' LAKES, FL 33549

FEI Number: 59-3471842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINYON, ROBERT W PRES
15445 N. NEBRASKA AVE.
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

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: ROBERT W. KINYON

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:

Title: P () Delete
Name: KINYON, ROBERT W
Address: 21033 LAKE TALIA BLVD
City-St-Zip: LAND O LAKES, FL 34638

Title: VP () Delete
Name: KINYON, JR, ROBERT W
Address: 3109 FOXWOOD BLVD.
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: S/T () Delete
Name: KINYON, HELEN A S/T
Address: 21033 LAKE TALIA BLVD
City-St-Zip: LAND O LAKES, FL 34638

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: ROBERT W. KINYON

P

09/28/2009

Electronic Signature of Signing Officer or Director

Date