2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P9900080997 1. Entity Name LABOR LINE, INC.							FILED 07 JAN 22 PM 3: 20		
Principal Place 12425 28TH #103 CLEARWATER	STREET N		Mailing Address 12425 28TH STREET M #103 CLEARWATER, FL 3370			SECRETARY OF STATE TALEAHASSEE, FLORIDA			
		ness - No P.O. Box #	3. Mailing Address						
Suite, Apt. #, etc. Suite 106 City & State			Suite, Apt. #, etc. Suite 106 City & State				182007 FEW PAPPING TO THE PAPPING FOR THE PAPP		
Zip		Country	Zip	Coun	itry		5. Certificate of Status Desired \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
1201 HAYS	S STREE	RVICE COMPANY T 32301-2525			Street Ad	d& 5 Q	nnor & Associates P.SquithmBelshasepRoad e 160		
					City Lare				
8. 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. I am familiar with, and acc the obligations of registered agent.									
Patrick M. O'Connor 01/19/07									
Signature, typed or printed name of registered agent and title if applicable # (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOWIII FEE IS \$900.00									
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME	COB Delete				E IE	S	☐ Change XXX Addition Sfield, Chris		
STREET ADDRESS CITY+ST-ZIP	12425 28	TH STREET NORTH, S RSBURG, FL 33716	TE. 103	ET ADDRESS -ST-ZIP	124	2425 28th Stree North, Suite 106			
TITLE	S	ON DECCY	XIX Delete	TITLI	1		☐ Change ☐ Addition		
NAME STREET ADDRESS CITY-ST-ZIP	12425 28	ON, PEGGY TH STREET NORTH, S ERSBURG, FL 33716	TE. 103 STR		ET ADDRESS				
TITLE	T XIX Delete TITL				E		☐ Change ☐ Addition		
NAME STREET ADDRESS CITY-ST-ZIP	•				EET ADDRESS ST-ZIP				
TITLE	VPCO	INGBONG, I'E 33710	XX Delete	TITL!			☐ Change ☐ Addition		
NAME	ı	ONI, BEATRICE	2111	NAM	EET ADDRESS		300086472623 01/30/0701005014 **900.00		
STREET ADDRESS CITY-ST-ZIP	12.120.2011.121.1111				-ST-ZIP		01/30/0701005014 **900.00		
TITLE			☐ Delete	TITLI NAM			☐ Change ☐ Addition		
NAME STREET ADDRESS CITY-ST-ZIP				STRE	EET ADORESS '- ST - ZIP				
TITLE			Delete	TITL			Change Addition		
NAME STREET ADDRESS CITY-ST-ZIP				- 1	EET ADDRESS '-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the reservoir or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered. SIGNATURE: Chris Brasfield O1/19/07 727/572-7820									
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Prone #									