2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000090830

FILED Oct 06, 2009 Secretary of State

Entity Nam	ie: LOOK OL	IT BELOW TREE SERVICE, INC	0.		
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
921 EAST (APOPKA, F					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
921 EAST (APOPKA, F					
FEI Number:	59-3613585	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SINGLETOI 440 KNOLL APOPKA, F		JR S	SINGLETON, WILLIAM 921 EAST OAK ST APOPKA, FL 32703	BJR US	
The above in the State		submits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE: WILL SINGLETON				10/06/2009	
	Electron	ic Signature of Registered Ager	t	Date	
		3(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () SINGLETON JR 440 KNOLL TRE APOPKA, FL 33	EE LN.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () DRUMMOND, P 32326 WOLF B SORRENTO, FL	RANCH LN.	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: WILL SINGLETON **PREZ** 10/06/2009