2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S38747

Entity Name: MEDCO FINANCIAL, INC.

FILED May 08, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

11011 SW 11TH COURT 8991 NW 188 ST. PEMBROKE PINES, FL 33025 MIAMI, FL 33018

Current Mailing Address: New Mailing Address:

11011 SW 11TH COURT 8991 NW 188 ST PEMBROKE PINES, FL 33025 MIAMI, FL 33018

FEI Number: 65-0302518 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MASSING, ELEANOR K
11011 SW 11TH COURT
PEMBROKE PINES, FL 33025 US
MILLER, BRYAN W
8991 NW 188 STREET
MIAMI, FL 33018 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.

SIGNATURE: BRYAN W. MILLER 05/08/2007

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 Title: P (X) Change () Addition

 Name:
 MILLER, BRYAN W
 Name:
 MILLER, BRYAN W

 Address:
 8991 NW 188TH STREET
 Address:
 8991 NW 188TH STREET

 City-St-Zip:
 MIAMI, FL 33025
 City-St-Zip:
 MIAMI, FL 33018

Title: D () Delete Title: D (X) Change () Addition
Name: MILLER, GEORGINA Name: MILLER, GEORGINA

 Name:
 MILLER, GEORGINA
 Name:
 MILLER, GEORGINA

 Address:
 8991 NW 188TH STEET
 Address:
 8991 NW 188TH STREET

 City-St-Zip:
 MIAMI, FL 33025
 City-St-Zip:
 MIAMI, FL 33018

Title: D () Delete Title: () Change () Addition

 Name:
 WISE, FRANK
 Name:

 Address:
 445 E 25TH STREET
 Address:

 City-St-Zip:
 HIALEAH, FL 33013
 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: BRYAN W. MILLER P 05/08/2007