2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# V64912

FILED Oct 01, 2009 Secretary of State

Entity Name: CHET LEMON ENTERPRISES, INC.

Current F	Principal Place of Business:	New Principal Place of Business:
4400 N. H	IWY 19A	
UNIT #6 MOUNT F	OORA, FL 32757 US	
		Nove Mailing Address.
Current	Mailing Address:	New Mailing Address:
PO BOX 7 EUSTIS, F	757 FL 32727 US	
FEI Numbei	r: 59-3143962 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of Current Registered Ager	t: Name and Address of New Registered Agent:
LEMON, 0 4400 N. H UNIT #6	IWY 19A	
INICOLAL	DORA, FL 32757 US	New Mailing Address: New Mailing Address:
The above	,	the purpose of changing its registered office or registered agent, or both
The above in the Stat	e named entity submits this statement for te of Florida. JRE: GIGI LEMON	
The above in the Stat	e named entity submits this statement for te of Florida.	
The above in the Stat SIGNATU	e named entity submits this statement for te of Florida. JRE: GIGI LEMON	d Agent Date
The above in the State SIGNATU	e named entity submits this statement for te of Florida. IRE: GIGI LEMON Electronic Signature of Registere	d Agent Date
The above in the Stat SIGNATU Election Ca OFFICER Title: Name: Address:	e named entity submits this statement for te of Florida. JRE: GIGI LEMON Electronic Signature of Registere ampaign Financing Trust Fund Contribution () RS AND DIRECTORS: DP () Delete LEMON, CHESTER E 4400 N HWY 19A, UNIT #6	d Agent Date
The above in the State SIGNATU	e named entity submits this statement for te of Florida. JRE: GIGI LEMON Electronic Signature of Registere ampaign Financing Trust Fund Contribution () RS AND DIRECTORS: DP () Delete LEMON, CHESTER E 4400 N HWY 19A, UNIT #6	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Title: () Change () Addition Name: Address:

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: GIGI LEMON DST 10/01/2009