PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
11 APR 20 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000003205

1. Corporation Name
~~ELOHIM NATIONAL & INTERNATIONAL MINISTRIES, INC.~~ ELOHIM MINISTRIES INC - REINSTATEMENT 2004 - 2011

CRG 4/20

CR2E081 (11/10)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
3741 Cardinal Oaks Cir.	3741 Cardinal Oaks Cir.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orange Park, Florida	City & State: Orange Park, Florida
Zip: 32065 Country: Clay	Zip: 32065 Country: Clay

4. Date Incorporated or Qualified To Do Business in Florida: May 2, 200[illegible]

5. FEI Number: 20-0724638 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $5.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Rev. Raymond Clotaire

Street Address (P.O. Box Number is Not Acceptable): 3741 Cardinal Oaks Cir.

Suite, Apt. #, Etc.

City: Orange Park | State: FL | Zip Code: 32065

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8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent _____ Date 4/17/2011
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P Rev.	Raymond Clotaire	3741 Cardinal Oaks Cir	Orange Park, Fl. 32065
S Mrs	Alice Benoit	968 Steeple Chase Ln	Orange Park, Fl. 32065
V Mr.	Wilson Adonis	356 Summit Dr	Orange Park, Fl. 32073

10. E-mail Address: rayclotaire@ymail.com
(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S.; I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: [signature] Rev. Raymond Clotaire 4/17/2011 (904)248-9599
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #