PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED AND FILED

1997 FEB 13 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Read Instructions on Other Side Before Making Entries
Make Check Payable To: *Department of State*

1. Name and Mailing Address of Corporation: DOCUMENT # N94000006334

OUR LORD HOUSE OF PRAYER OF THE APOSTOLIC FAITH
10855 NW 7 AVE Ste. 105
MIAMI FL 33168

2. If Address in Block 1 is incorrect in any way, enter the correct address below:

Address

City and State Zip Code

3. If Principle Office Address is different from mailing address, enter address below:

Address

City and State Zip Code

4. Date Incorporated or Qualified To Do Business in Florida: 12/94

5. FEI Number

FEI Number Applied For

✓ FEI Number Not Applicable

6. $8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres/D	Willie Whisby Sr.	10855 NW 7 AVE #105, Miami FL	Miami FL 33168
Sec/D	Janet W. Barr	1544 NW 44 ST	Miami FL 33142
TREAS/D	Josphe L. Whisby Sr.	1545 NW 43 ST	Miam. FL 33142

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-02/14/97--01077-010
****358.75 ****358.75

REINSTATEMENT

REGISTERED AGENT INFORMATION

8. Name and Address of Current Registered Agent

Willie Whisby Sr.
10855 NW 7 AVE #105
Miami FL 33168

9. If changed, new registered agent / office

Name: Willie Whisby Sr

Street Address (Do NOT Use P.O. Box Number): 10855 NW 7 AVE Ste: 105

Street Address (Do NOT Use P.O. Box Number)

City: Miami | State: FL. | Zip: 33168

10. I being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Willie Whisby — REGISTERED AGENT MUST SIGN — Date: 2/2/98

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☑ (See other side for information on intangible tax.)

13. 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. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Officer or Director: Willie Whisby — Date: 2/2/97 — Daytime Phone #: (305) 638-2756

Typed or printed name of signing officer or director: Elder, Willie Whisby

CR2E040 (8/92)