PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
07 SEP 25 AM 1:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N04000010290

1. Corporation Name

Just As I Am International Ministries, Inc

W07123834

REINSTATEMENT

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
2170 Rutland Street	P.O. Box 681668
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Opa Locka, FL	Miami, FL
Zip 33054 / Country Dade	Zip 33143 / Country Dade

4. Date Incorporated or Qualified To Do Business in Florida: 11-02-04

5. FEI Number: 20--2867146 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Lydia Goodin

Street Address (P.O. Box Number is Not Acceptable): 2170 Rutland Street

Suite, Apt. #, Etc.:

City: Opa Locka State: FL Zip Code: 33054

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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: Lydia Goodin — REGISTERED AGENT MUST SIGN — Date: May 2, 2007

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	Goodin, Lydia	2170 Rutland Street	Opa Locka, FL 33054 US
VP	Vanhorn, Ron	1000 Harrison Street	Hollywood, FL 33019 US
T	Newkirk, Robert	5601 NW 18th Avenue	Miami, FL 33142 US
S	Saracino, Toni	2170 Rutland Street	Opa Locka, FL 33054

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10. 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., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. 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: Lydia Goodin — Lydia Goodin — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
May 02, 2007 — Date
954-744-6505 — Daytime Phone #

Mitchell SEP 25 2007