

**2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N12000001820

**Entity Name:** ELEV8HOPE INC.**Current Principal Place of Business:**1111SW MARTIN DOWNS BLVD  
SUITE B  
PALM CITY, FL 34990**Current Mailing Address:**1399 SE LEGACY COVE CIRCLE  
STUART, FL 34997 US**FEI Number:** 90-0806545**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHPIRUK, RINA  
1399 SE LEGACY COVE CIRCLE  
STUART, FL 34997 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:** RINA SHPIRUK

10/04/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SHPIRUK, RINA  
Address        1399 SE LEGACY COVE CIRCLE  
City-State-Zip: STUART FL 34997

Title            DIRECTOR, TREASURER  
Name            OFFRINGA, KYLE  
Address        1399 SE LEGACY COVE CIRCLE  
City-State-Zip: STUART FL 34997

Title            DIRECTOR  
Name            SHPIRUK, DEVON  
Address        1399 SE LEGACY COVE CIRCLE  
City-State-Zip: STUART FL 34997

Title            DIRECTOR  
Name            SHPIRUK, TREVOR  
Address        1399 SE LEGACY COVE CIRCLE  
City-State-Zip: STUART FL 34997

Title            DIRECTOR  
Name            SHPIRUK, MITCHELL  
Address        1399 SE LEGACY COVE CIRCLE  
City-State-Zip: STUART FL 34997

Title            DIRECTOR  
Name            VAUGHN, MEGHAN  
Address        4224 SE CENTERBOARD LA  
City-State-Zip: STUART FL 34997

Title            VP  
Name            DEL TORO, PETER  
Address        73 SW FLAGLER AVE  
City-State-Zip: STUART FL 34995

Title            DIRECTOR  
Name            UHL, JACLYN  
Address        2383 SW SPOONBILL DRIVE  
City-State-Zip: PALM CITY FL 34990

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RINA SHPIRUK

CEO

10/04/2019

Electronic Signature of Signing Officer/Director Detail

Date