2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F07000002588

Entity Name: BILLION SOULS, INC.

FILED Dec 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3766 N DELAWARE AVE 820 E. PRIMROSE

SPRINGFIELD, MO 65803 SPRINGFIELD, MO 65807

Current Mailing Address: New Mailing Address:

PO BOX 5143 P.O. BOX 411605

SPRINGFIELD, MO 65801 MELBOURNE, FL 32941

FEI Number: 20-8366637 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WEBSTER, JOANN 451 LIGHTHOUSE LANDING STREET SATELLITE BEACH, FL 32937 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: JOANN WEBSTER

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

:: CPT () Delete Title: PD (X) Change() Addition

 Name:
 DAVIS, JIMMY O
 Name:
 DAVIS, JAMES O

 Address:
 3766 N DELAWARE AVE
 Address:
 3199 SUNTREE, SUITE 1

 City-St-Zip:
 SPRINGFIELD, MO 65803
 City-St-Zip:
 ROCKLEDGE, FL 32955

Title: DS () Delete Title: VPTD (X) Change () Addition Name: DAVIS, SHERI R Name: WEBSTER, JOANN

Address: 3766 N DELAWARE AVE Address: 3199 SUNTREE, SUITE 1
City-St-Zip: SPRINGFIELD, MO 65803 City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete Title: SD (X) Change () Addition

Name: PAUL, EVAN D Name: TUTTLE, CHARLES
Address: 3751 N DELAWARE Address: 4100 ELDORADO PARKWAY, SUITE 100-393

City-St-Zip: SPRINGFIELD, MO 65803 City-St-Zip: MCKINNEY, TX 75070

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

SIGNATURE: JOANN WEBSTER VP/D 12/23/2008