2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000065177

Entity Name: JEREMIAH 15:21 INVESTMENT GROUP, L.L.C.

FILED Oct 06, 2009 Secretary of State

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

3350 SW 117TH AVENUE 17430 NW 27TH AVENUE DAVIE, FL 33330 MIAMI GARDENS, FL 33056

Current Mailing Address: New Mailing Address:

P.O. BOX 279247 MIRAMAR, FL 33027

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MONESTIME, HEURTELOU

3350 SW 117TH AVENUE

DAVIE, FL 33330 US

ELECTRONIC TAX , INSURANCE AND ETC

17410 NW 27TH AVENUE

MIAMI GARDENS, FL 33056 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.

ADDITIONS/CHANGES:

SIGNATURE: BRANNOCK RUDD 10/06/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM Title: () Delete (X) Change () Addition A.D.A.M. NON-PROFIT S.A.J.Z. INT'L ENTERPRISE Name: Name: Address: 3350 SW 117TH AVENUE Address: 17410 NW 27TH AVENUE STE 2 City-St-Zip: **DAVIE, FL 33330** City-St-Zip: MIAMI GARDENS, FL 33056

Title: MGRM () Delete Title: (X) Change () Addition SAI THAME'-THEIA, P.L.L.C. Name: Name: POUX, MARJORIE J MGRM Address: 3350 SW 117TH AVENUE Address: 17430 NW 27TH AVENUE City-St-Zip: **DAVIE, FL 33330** City-St-Zip: DAVIE, FL 33330

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 SAI THAME-THEIA INT'L
 Name:

 Address:
 P.O. BOX 279247
 Address:

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 S.A.J.Z. INT'L ENTERPRISE
 Name:

 Address:
 3350 SW 117TH AVENUE
 Address:

 City-St-Zip:
 DAVIE, FL 33330
 City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARJORIE POUX MGRM 10/06/2009