PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 DEC 28 PM 4:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N00000000801

1. Corporation Name
Fanm Ayisyen nan Palm Beach County

2. Principal Office Address	3. Mailing Office Address
61 Sparrow Drive	P.O. Box 221703
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ~~West~~ Royal Palm Beach, FL	City & State: West Palm Beach, FL
Zip: 33411 Country: U.S.	Zip: 33422 Country: U.S.

REINSTATEMENT 2001

4. Date Incorporated or Qualified To Do Business in Florida: Feb. 7, 2000

5. Fed. Number: 65-1013151 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional for certificate of status

7. Name and Address of Current Registered Agent:

Name: Freda Laurent

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Street Address (P.O. Box Number is Not Acceptable): 61 Sparrow Drive

Suite, Apt. #, Etc.:

LS

City: Royal Palm Beach State: FL Zip Code: 33422

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: Freda B. Laurent FREDA B. LAURENT
REGISTERED AGENT MUST SIGN

Date: 10-25-01

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
president/ director	Freda B. Laurent	61 Sparrow Drive	Royal Palm Beach FL 33411
vice president director	Michelle Monse	730 Gardenia Drive	Royal Palm Beach FL 33411
director/ secretary	Linda A. Breed	6198 Fair Green Rd	West Palm Beach FL 33417
director treasurer	Catheline Jean-Pierre	832 N. Federal Highway	Lake Worth, FL 33460

10. I certify that I am an officer or director of the registrant or authorized 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 under section 119.07(3)(i), 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: Lindall Breed Linda A. Breed 10/25/01 561 386 4798
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #