2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000002929

FILED Feb 26, 2009 Secretary of State

Entity Name: AWAKENING TRUE VINE INTERNATIONAL OUTREACH MINISTRIE INC.

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

2328 SW DODGE TER 600 MARSH ISLE CIRCLE

PORT SAINT LUCIE, FL 34953 #102

PORT SAINT LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

2328 SW DODGE TER 600 MARSH ISLE CIRCLE

PORT SAINT LUCIE, FL 34953 US #102

PORT SAINT LUCIE, FL 34952 US

FEI Number: 65-1093392 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

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

PARCHMENT, LOIS J APOSTLE
2328 SW DODGE TER
PARCHMENT, LOIS J APOSTLE
600 MARSH ISLE CIRCLE

PORT SAINT LUCIE, FL 34953 US #102 PORT SAINT LUCIE, FL 34952 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: APOSTLE LOIS J. PARCHMENT 02/26/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 PARCHMENT, LOIS J APOSTLE
 Name:
 PARCHMENT, LOIS J APOSTLE

 Address:
 2328 SW DODGE TER
 Address:
 600 MARSH ISLE CIRCLE #102

City-St-Zip: PORT SAINT LUCIE, FL 34953 US City-St-Zip: PORT SAINT LUCIE, FL 34952 US

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

 Name:
 HILL, ALMA
 Name:
 JOHNSON, BETSEY

 Address:
 1701 NW 6TH COURT - APT#2-207
 Address:
 600 MARSH ISLE CIR #102

 City-St-Zip:
 FT LAUDERDALE, FL 33311 US
 City-St-Zip:
 PORT SAINT LUCIE, FL 34952 US

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

 Name:
 WANDA, WILCOX ADMIN
 Name:
 TINA, CASH ADMIN

 Address:
 18401 NW 43RD COURT
 Address:
 665 NW 195TH TERR.

 City-St-Zip:
 MIAMI GARDENS, FL 33055 US
 City-St-Zip:
 MIAMI, FL 33169 US

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: APOSTLE LOIS J. PARCHMENT PD 02/26/2009