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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

09 MAY 15 AM 10: 38

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N01000005357

1. Corporation Name
AgAPE Community Development Corp.

100152405331
04/24/09--01043--020 **248.75

CR2E081 (12/08) B 5/18/09

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
2230 NW 22nd St	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ft. Lauderdale, FL	City & State
Zip: 33311 Country: Broward	Zip Country

4. Date Incorporated or Qualified To Do Business In Florida

5. FEI Number: 65-0122675 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $6.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Mack, Darnell

Street Address (P.O. Box Number is Not Acceptable): 630 NE 40th St

Suite, Apt. #, Etc.

City: Pompano Beach State: FL Zip Code: 33064

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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: Darnell Mack Date: March 31, 2009
REGISTERED AGENT MUST SIGN

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
	Mack, Darnell	630 NE 40th St	Pompano Bch FL 33064
	Mack, Elaine	630 NE 40th St	Pompano Bch FL 33064
	Bernard, Erinn	2614 NW 6th Ct	Pompano Bch FL 33069
	Wilson, Jennifer	2080 N.E. 1st Ave.	Pompano Bch, FL 33060
	Mobley, Sally	2773 NW 4th Ct	Pompano Bch. FL 33069
	Harris, Patricia	6983 N.W. 19th St.	Margate FL 33063

10. I certify that I am an officer or director or the receiver or trustee empowered 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 contained in Chapter 119, 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: Darnell Mack March 31 2009
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Bishop Darnell Mack - President
Elaine Mack - Vice President
Jennifer Wilson - Administrative Assist.
Erinn Bernard - Secretary
Pat Harris - Treasure
Sally Mobley - Assistant Treasure