2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000008567

FILED May 29, 2008 Secretary of State

Entity Name: ORLANDO YOUNG PROFESSIONALS LEADERSHIP GROUP, INC.

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

PO BOX 1629 1714 VIRGINIA DRIVE ORLANDO, FL 32829 0RLANDO, FL 32803

Current Mailing Address: New Mailing Address:

P.O. BOX 1629 PO BOX 547881 ORLANDO, FL 32802 US ORLANDO, FL 32854

FEI Number: 75-3001659 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:

TAYCO ENTERPRISES, INC.

8406 PCB PRKWY

SUITE L

PANAMA CITY BEACH, FL 32407 US

SCOTT, MATTHEW

1714 VIRGINIA DRIVE
ORLANDO, FL 32803 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: MATTHEW SCOTT 05/29/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 LATORRE, JUSTIN
 Name:
 COLANGELO, VICTORIA

 Address:
 PO BOX 941742
 Address:
 PO BOX 547881

 City-St-Zip:
 MAITLAND, FL 32794
 City-St-Zip:
 ORLANDO, FL 32854

Title: S () Delete Title: EVP (X) Change () Addition
Name: KERENSKY, VICTORIA Name: SCOTT, MATTHEW

Address: PO BOX 941742

 Address:
 PO BOX 941742
 Address:
 PO BOX 547881

 City-St-Zip:
 MAITLAND, FL 32794
 City-St-Zip:
 ORLANDO, FL 32854

Title: TD () Delete Title: VPT (X) Change () Addition Name: ALLUM, DONNA Name: THIBODEAUX, FRED

 Address:
 PO BOX 941742
 Address:
 PO BOX 547881

 City-St-Zip:
 MAITLAND, FL 32794
 City-St-Zip:
 ORLANDO, FL 32854

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

 Name:
 Name:
 HARRELL, KALEB

 Address:
 Address:
 PO BOX 547881

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32854

Title: VPCS () Change (X) Addition

 Name:
 Name:
 CURRAN, JOHN

 Address:
 Address:
 PO BOX 547881

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32854

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

 Name:
 Name:
 LATORRE, JUSTIN

 Address:
 Address:
 PO BOX 547881

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32854

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: MATTHEW SCOTT EVP 05/29/2008