2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000010104

Entity Name: FROM HEAVEN WITH LOVE, INC.

FILED Oct 20, 2005 Secretary of State

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

10010 SW 145 PL 7230 NW 114 AVENUE

MIAMI, FL 33186 203

MIAMI, FL 33178

Current Mailing Address: New Mailing Address:

10010 SW 145 PL 7230 NW 114 AVENUE

MIAMI, FL 33186 203 MIAMI, FL 33178

FEI Number: 75-3137574 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:

DUENAS, LUCELLY DUENAS, LUCELLY 7230 NW 114 AVENUE 10010 SW 145 PL MIAMI, FL 33186 US MIAMI, FL 33178

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: LUCELLY DUENAS 10/20/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP (X) Change () Addition () Delete

DUENAS, LUCELLY DUENAS, LUCELLY Name: Name: 10010 SW 145 PL Address: 7230 NW 114 AVENUE,203 Address:

MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33186 City-St-Zip:

Title: () Delete Title: (X) Change () Addition SALVADOR, BLANCA Name:

Name: SALVADOR, BLANCA Address: 10010 SW 145 PL Address: 7230 NW 114 AVENUE, 203

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33178

Title: DS () Delete Title: DS (X) Change () Addition RAMIREZR, ONDINA Name: RAMIREZR, ONDINA Name:

10010 SW 145 PL 7230 NW 114 AVENUE, 203 Address: Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33178

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

DUENAS, LUCELLY Name: Name: DUENAS, LUCELLY

Address: 10010 SW 145 PL Address: 7230 NW 114 AVENUE, 203 City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUCELLY DUENAS DP 10/20/2005