2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0400000316

Entity Name: FIRST LOVE MINISTRIES, INC.

FILED Jul 24, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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4815 CHEROKEE ROSE DR. 6992 BRESCIA WAY ORLANDO, FL 32808 ORLANDO, FL 32819

Current Mailing Address: New Mailing Address:

 4815 CHEROKEE ROSE DR.
 6992 BRESCIA WAY

 ORLANDO, FL 32808
 ORLANDO, FL 32819

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

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:

RAMIREZ, LEAH
4815 CHEROKEE ROSE DR.
6992 BRESCIA WAY
ORLANDO, FL 32808 US
ORLANDO, FL 32819 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: LEAH RAMIREZ 07/24/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 RAMIREZ, LEAH
 Name:
 RAMIREZ, LEAH

 Address:
 4815 CHEROKEE ROSE DR.
 Address:
 6992 BRESCIA WAY

 City-St-Zip:
 ORLANDO, FL 32808
 City-St-Zip:
 ORLANDO, FL 32819

Title: VD () Delete Title: VD (X) Change () Addition Name: RAMIREZ, LARRY Name: RAMIREZ, LARRY

Address: 4815 CHEROKEE ROSE DR. Address: 6992 BRESCIA WAY
City-St-Zip: ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete Title: () Change () Addition

 Name:
 WYNN, DEBRA
 Name:

 Address:
 1720 HAVEN DR.
 Address:

 City-St-Zip:
 ORLANDO, FL 32808
 City-St-Zip:

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: LARRY RAMIREZ VD 07/24/2008