2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000000425

Entity Name: TYLOR FOUNDATION INC.

FILED Nov 12, 2007 Secretary of State

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

9880 MARINA BLVD. 9880 MARINA BLVD.

1535 1535

BOCA RATON, FL 33428 BOCA RATON, FL 33428 US

Current Mailing Address: New Mailing Address:

9880 MARINA BLVD. 9880 MARINA BLVD.

1535

BOCA RATON, FL 33428 BOCA RATON, FL 33428 US

FEI Number: 20-0596949 FEI Number Applied For () FEI Number Not Applicable () 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:

TYLOR, SOFEA 9880 MARINA BLVD, 1535

BOCA RATON, FL 33428 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: SOFEA TYLOR

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DPST () Delete Title: DPST (X) Change () Addition

Name: TYLOR, SOFEA Name: TYLOR, SOFEA

 Address:
 9880 MARINA BLVD. SUITE 1535
 Address:
 9880 MARINA BLVD. SUITE 1535

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:
 BOCA RATON, FL 33428 US

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

 Name:
 KAISER, NICOL T.
 Name:
 KAISER, NICOL T.

 Address:
 4005 ROSEMARY AVE
 Address:
 3549 FORREST HILL BL

Address: 4005 ROSEMARY AVE Address: 3549 FORREST HILL BLVD #18
City-St-Zip: WEST PALM BEACH, FL City-St-Zip: PALM SPRINGS, FL 33406 US

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

 Name:
 KAISER, CRISTINA
 Name:
 KAISER, CRISTINA

 Address:
 4005 S. ROSEMARY AVE
 Address:
 339 PURITAN RD

City-St-Zip: WEST PALM BEACH, FL City-St-Zip: WEST PALM BEACH, FL 33405 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: SOFEA TYLOR DPST 11/12/2007