


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
08 NOV 24 PM 3:12

STATE
TALLAHASSEE, FLORIDA

800138230108
11/24/08--01030--015 **257.75

REINSTATEMENT 05-08

DOCUMENT # ND4 00000 3913
1. Corporation Name
ARTHUR LEE McDUFFIE Foundation
youth center

2. Principal Office Address - No P.O. Box # 1870 N.W. 1875T		3. Mailing Office Address 1870 N.W. 1875T	
Suite, Apt. #, etc. House		Suite, Apt. #, etc. House	
City & State Miami Florida		City & State Miami Florida	
Zip 33056	Country DADE COUNTY	Zip 33056	Country DADE COUNTY

4. Date Incorporated or Qualified To Do Business in Florida year 20005	5. FEI Number Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name
Shedricka McDuffie Johnson

Street Address (P.O. Box Number is Not Acceptable)
1870 N.W. 1875T

Suite, Apt. #, Etc.
House

City
MIAMI

State
FL

Zip Code
33056

☒ 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
Shedricka McDuffie Johnson

Date
11/18/08

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
CEO Director	SHEDRICKA M. JOHNSON	1870 N.W. 1875T	Miami Florida 33054
Vice President	Dewana McDuffie	18901 N.W. 43 AVE	Miami, Florida 33055
Trustee	SHEDRICKA M. JOHNSON	1870 N.W. 1875T	Miami Florida 33056
	Dewana McDuffie	18901 N.W. 43 AVE	Miami, Florida 33055
Secretary	JESSICA MORRIS	1870 N.W. 1875T	Miami Florida 33056
	ONI IBIKUNKE FRYE	1311 NE 125 ST APT# 202	Miami, Florida 33161
Chairman	OCTAVIA DRAKE	6400 N.W. Miamiplace	Miami, Florida 33015

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: Shedricka M. Johnson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date
11/18/08

Daytime Phone #