2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000667

Entity Name: COMMANDED BLESSINGS, INC.

Oct 13, 2006 Secretary of State

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

612 NORTH BRONOUGH STREET TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

612 NORTH BRONOUGH STREET TALLAHASSEE, FL 32303

FEI Number: 01-0827264 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:

TOWELS, CARLIN 173 ELLIŚ ROAD TALLAHASSEE, FL 32317

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: CARLIN TOWELS

Date

Electronic Signature of Registered Agent

US

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

TOWELS, CARLIN Name: Name: 173 ELLIS ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL 32317 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

HARRIS, JAMES Name: Name: Address: 8979 HARRIS PALMER LANE Address: City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip:

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

WALKER, LARRY HOWARD, BARBARA Name: Name:

1727 LAKE MARY STREET 612 NORTH BRONOUGH STREET Address: Address: City-St-Zip: TALLAHASSEE, FL 32310 City-St-Zip: TALLAHASSEE, FL 32303

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

Name: SMITH, SHARON Name: TOWELS, ANGEL 612 NORTH BRONOUGH STREET 2501 LAKE BRADFORD ROAD Address: Address:

City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32310

Title: (X) Delete Title: () Change () Addition THOMAS, BARBARA Name: Name:

612 NORTH BRONOUGH STREET Address: Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip:

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

TOWELS, ANGEL Name: Name: Address: 2501 LAKE BRADFORD RD. Address: TALLAHASSEE, FL 32310 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANGEL TOWELS SD 10/13/2006