PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
08 JAN 16 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N05000004110

1. Corporation Name

The New Universal Church Of Deliverance, Inc.

01/07/08 01042 011 **192.50

REINSTATEMENT 06-08

WOP

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
3400 Randolph Street		841 Raintree Ave.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Melbourne, Florida		Rockledge, Florida	
Zip	Country	Zip	Country
32901	US	32955	US

4. Date Incorporated or Qualified To Do Business in Florida: December 31, 2005

5. FEI Number: 54-2171968 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑

7. Name and Address of Current Registered Agent

Name: Derrick R. Walker

Street Address (P.O. Box Number is Not Acceptable): 841 Raintree Ave.

Suite, Apt. #, Etc.:

City: Rockledge | State: FL | Zip Code: 32955

☑ 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: [signature] Date: January 16, 2008

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
Pres.	Derrick R. Walker	841 Raintree Ave.	Rockledge, Florida 32955
V-Pres	Lenel Walker	841 Raintree Ave.	Rockledge, Florida 32955
Chairm	Donald Jones(Deacon)	2115 Washington Street Apt. B	Melbourne, Florida 32901
Sec.	Ryan Bletcher	514 Malabar Road #202	Palm Bay, Florida 32907
Acct.	Shakami Servant	3525 Randolph Street	Melbourne, Florida 32901

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: [signature] DERRICK R. WALKER 1-16-2008 321-633-0038

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Area Phone #