2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N05000004690

Entity Name: OUT OF THE RAIN SOCIETY, INC.

Current Principal Place of Business:

5151 ROUND LAKE ROAD
APOPKA, FL 32712

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1536
SORRENTO, FL 32776

New Mailing Address:

5151 ROUND LAKE ROAD
APOPKA, FL 32712

FEI Number: 74-3145649 **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:

GENERAL COUNSEL ADVISORS, P.A.
1001 NORTH LAKE DESTINY ROAD
SUITE 300
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

CONTRACT REVIEW SERVICES, LLC
174 W. COMSTOCK AVENUE
SUITE 103
WINTER PARK, FL 32789 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: NORA H. MILLER, ESQ. 05/01/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SELLERS, ANDREW
Address: 5151 ROAD LAKE ROAD
City-St-Zip: APOPKA, FL 32712 US

Title: D ( ) Delete
Name: HANSEN, JON
Address: 5151 ROUND LAKE ROAD
City-St-Zip: APOPKA, FL 32712 US

Title: D ( ) Delete
Name: SELLERS, AMY
Address: 5151 ROUND LAKE ROAD
City-St-Zip: APOPKA, FL 32712 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: ANDREW L. SELLERS MR. 05/01/2008
Electronic Signature of Signing Officer or Director — Date