

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000010435

FILED
Nov 05, 2009
Secretary of State

Entity Name: SFH MINISTRIES, INC.

Current Principal Place of Business:

1581 WEST 49TH STREET
327
HIALEAH, FL 33012 US

New Principal Place of Business:

3682 WEST 12TH AVENUE
HIALEAH, FL 33012 US

Current Mailing Address:

1581 WEST 49TH STREET
327
HIALEAH, FL 33012 US

New Mailing Address:

3682 WEST 12TH AVENUE
HIALEAH, FL 33012 US

FEI Number: 20-3860183 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:

ROJAS, BARBARA
7125 NW 186 STREET
B203
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

S.F.H, LLC P
3682 WEST 12TH AVENUE
HIALEAH, FL 33012 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: REINOLD CABRERAS

11/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROJAS, BARBARA
Address: 7125 NW 186 STREET #B203
City-St-Zip: MIAMI, FL 33015 US

Title: VP () Delete
Name: REINOLD, CABRERAS
Address: 700 TAMiami BLVD
City-St-Zip: MIAMI, FL 33144 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: S.F.H, LLC
Address: 3682 WEST 12TH AVENUE
City-St-Zip: HIALEAH, FL 33012 US

Title: VP (X) Change () Addition
Name: S.F.H, LLC
Address: 3682 WEST 12TH AVENUE
City-St-Zip: HIALEAH, FL 33012 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: REINOLD CABRERAS

P

11/05/2009

Electronic Signature of Signing Officer or Director

Date