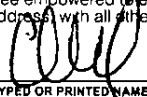


# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 JUN -3 PM 3:27

<b>DOCUMENT # N06000009338</b> 1. Entity Name DKDK GOD IS THE ONLY HOPE MINISTRY "INC" 2CHRONICLES. 7:14 LAMETATIONS.3:22 TO 24			
Principal Place of Business 3959 KING DR HOUSE BRANDON, FL 33511		Mailing Address 3959 KING DR HOUSE BRANDON, FL 33511	
2. Principal Place of Business - No P.O. Box # <b>3959 King DR.</b> Suite, Apt. #, etc <b>H</b>		3. Mailing Address <b>3959 King DR</b> Suite, Apt. #, etc <b>H</b>	
City & State <b>Brandon, FL</b>		City & State <b>Brandon, FL</b>	
Zip <b>33511</b>		Zip <b>33511</b>	
Country 		Country 	
4. FEI Number		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  CHANTAL, ROSE L 3959 KING DR HOUSE BRANDON, FL 33511		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> <b>FL</b> Zip Code         </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.  <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">           SIGNATURE:  </div> <div style="width: 40%; text-align: right;"> <b>5-29-9</b>            DATE         </div> </div> <p style="font-size: small; text-align: center;">(NOTE: Registered Agent signature required when reinstating)</p>			
<b>FILE NOW!!! FEE IS \$122.50</b>		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
<b>Make check payable to Florida Department of State</b>			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEAUPLAN, WEZBERLY 5238 MARTIN ST. NAPLES, FL 34113	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center;"> <b>200156725692</b>  <b>06/03/09--01022--012 **122.50</b> </div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DUVERGE, JEAN 7665 TARA CIRCLE APT.107 NAPLES, FL 34104	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center;"> <b>000156725790</b>  <b>06/03/09--01022--013 **8.75</b> </div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ORPHE, DANIE 5271 HENINWAY AVE. APT.1507 NAPLES, FL 33116	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center;"> <b>REINSTATEMENT 07-09 KS</b> </div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHANTAL, ROSE L 3959 KING DR BRANDON, FL 33511	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center;"> <b>04/24/07 90100 001 \$61.25</b> </div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WARD, MARGARRET 7143 MANFIELD SHREVEPORT, LA 71108	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NOELUS, URGUE 101 STRAWBERRY AVE. APT. 6 LEWICON, ME 04240	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.  <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">           SIGNATURE:  </div> <div style="width: 40%; text-align: right;"> <b>9-25-08</b>  <b>5-29-9</b>            Date         </div> </div> <p style="font-size: small; text-align: center;">SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</p>			