2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0700000065

Entity Name: DESTINED TO SUCCEED, INC.

FILED Feb 13, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1124 BROADWAY COTTAGE, #L 505 W 7TH STREET RIVIERA BEACH, FL 33404 PAHOKEE, FL 33476

Current Mailing Address: New Mailing Address:

P. O. BOX 531096 505 W 7TH STREET LAKE PARK, FL 33403 PAHOKEE, FL 33476

FEI Number: 20-8139746 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:

BEDMINSTER, GAIL
4933 BARDADOS WAY NORTH
WEST PALM BEACH, FL 33401 US
BEDMINSTER, GAIL
505 7TH STREET
PAHOKEE, FL 33476 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: GAIL BEDMINSTER 02/13/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: BEDMINSTER, GAIL P () BEDMINSTER, GAIL

Address: 148 BRIARCLIFF DRIVE Address: 505 W 7TH STREET
City-St-Zip: KISSIMMEE, FL 34758 City-St-Zip: PAHOKEE, FL 33476

Title: VP () Delete Title: VP (X) Change () Addition Name: JENKINS, WILLIE SR. Name: JENKINS, WILLIE SR.

Address: 3155 LINTON ROAD Address: 120 HOMEPLACE COURT
City-St-Zip: KISSIMMEE, FL 34758 City-St-Zip: PAHOKEE, FL 33476

Title: S () Delete Title: () Change () Addition

 Name:
 ANDREWIN, MICHELLE
 Name:

 Address:
 3155 LINTON ROAD
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34758
 City-St-Zip:

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

 Name:
 WILLIAMS, PAMELA
 Name:
 WILLIAMS, PAMELA

 Address:
 3155 LINTON ROAD
 Address:
 3765 W 33RD STREET

 City-St-Zip:
 KISSIMMEE, FL 34758
 City-St-Zip:
 RIVIERA BEACH, FL 33404

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: GAIL BEDMINSTER P 02/13/2009