2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000006669

Entity Name: ONE FAMILY FOUNDATION, INC

FILED Feb 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1111 LINCOLN ROAD 555 WASHINGTON RD SUITE 400 SUITE 380

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

1111 LINCOLN ROAD 555 WASHINGTON RD SUITE 380

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

FEI Number: 26-0685015 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:

MADISON FINANCIAL GROUP LLC

1111 LINCOLN ROAD

SUITE 400

MADISON FINANCIAL GROUP LLC

555 WASHINGTON RD

SUITE 380

MIAMI BEACH, FL 30303 US MIAMI BEACH, FL 33139 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: SHARLENE CLARKE 02/05/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VP () Delete Title: VP (X) Change () Addition

 Name:
 BRYANT, CORTEZ
 Name:
 BRYANT, CORTEZ

 Address:
 1111 LINCOLN RD, SUITE 400
 Address:
 555 WASHINGTON RD

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

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

 Name:
 CARTER, DWAYNE
 Name:
 CARTER, DWAYNE

 Address:
 1111 LINCOLN RD, SUITE 400
 Address:
 555 WASHINGTON RD

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

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: DWAYNE CARTER P 02/05/2009