2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000007925

Name:

Address:

City-St-Zip:

BAKER, MR

7680 NE 33 STREET

HOLLYWOOD, FL 33024

FILED Nov 19, 2009 Secretary of State

Entity Nar	ne: BEGINN	ING OF CHANGE, INC.		•	
Current P	rincipal Plac	e of Business:	New Principal Place	of Business:	
4033 NE 7 OAKLAND	TH AVE PARK, FL 33	3334			
Current M	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
4033 NE 7 OAKLAND	TH AVE PARK, FL 33	3334			
FEI Number:	: 13-4363307	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	VINIFRED E 33 STREET 33024 US	3			
The above in the State	named entity of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE WINIER	ED E. ADAMS			
Electronic Signature of Registered Agent			ent	Date	
OFFICERS	S AND DIREC	CTORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (ADAMS, WINIF 7680 NW 33 S DAVIE, FL 33	TREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (FORD, PHYLL 640 PETUNIA PLANTATION,	DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RAYMOND, GI 1913 NE 26TH		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: WINIFRED E. ADAMS D 11/19/2009