

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000006104

FILED  
Sep 30, 2009  
Secretary of State

**Entity Name:** SAVING YOUR HOME FOUNDATION, INC

**Current Principal Place of Business:**

6355 NW 36 ST  
602  
MIAMI, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

6355 NW 36 ST  
602  
MIAMI, FL 33166 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **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:**

MONTANO, PIERINA  
6355 NW 36 ST  
602  
MIAMI, FL 33166 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: PIERINA MONTANO

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MONTANO, PIERINA  
Address: 6355 NW 36 ST # 602  
City-St-Zip: MIAMI, FL 33166 US

Title: S ( ) Delete  
Name: JACOBS, MERCEDES  
Address: 6355 NW 36 ST # 602  
City-St-Zip: MIAMI, FL 33166 US

Title: T ( ) Delete  
Name: FERNANDEZ, MAYRA  
Address: 6355 NW 36 ST # 602  
City-St-Zip: MIAMI, FL 33166 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PIERINA MONTANO

P

09/30/2009

Electronic Signature of Signing Officer or Director

Date