2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 19, 2009
Secretary of State

DOCUMENT# N08000007465

Entity Name: RESOLUTION FOR FREEDOM ORGANIZATION CORP.

Current Principal Place of Business:

3201 S.W. RONELA CT.
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 3683
FORT PIERCE, FL 34948

New Mailing Address:

3201 S.W. RONELA CT.
PORT ST. LUCIE, FL 34953

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

JONES, LAVERNE
3201 S.W. RONELA CT.
PORT ST. LUCIE, FL 34953 US

Name and Address of New Registered Agent:

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: LAVERNE JONES

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: JONES, LAVERNE
Address: 3201 S.W. RONELA CT.
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: S ( ) Delete
Name: MC DOUGALD, GLORIA
Address: 3304 APT. C
City-St-Zip: FORT PIERCE, FL 34982

Title: T ( ) Delete
Name: PLATT, GENERAL
Address: 1901 BARCELONA AVE.
City-St-Zip: FORT PIERCE, FL 34946

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: LAVERNE JONES PRES 10/19/2009

Electronic Signature of Signing Officer or Director — Date