2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000011058

FILED Aug 20, 2014 Secretary of State

Entity Name: SOUTHERN SUDAN LIFE SAVING MEDICAL MISSION, INC.

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

711 S LINCOLN AVE 1915 SCHLOTTER CIRCLE

APT D 5 # 204

CLEARWATER, FL 33756 HOLIDAY, FL 34690

New Mailing Address: Current Mailing Address:

711 S LINCOLN AVE 1915 SCHLOTTER CIRCLE APT D 5

204

HOLIDAY, FL 34690

FEI Number: 26-3584047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DENG, JOSEPH AKOK P PRESIDE DENG, JOSEPH AKOK 711 S LINCOLN AVE 1915 SCHLOTTER CIRCLE APT D 5 #204

CLEARWATER, FL 33756 US HOLIDAY, FL 34690 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: JOSEPH AKOK DENG 08/20/2014

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

CLEARWATER, FL 33756

DENG, JOSEPH AKOK Name:

Address: 1915 SCHLOTTER CIRCLE, #204

City-St-Zip: HOLIDAY, FL 34690

Title:

Name: DIECK, TRICIA

Address: 3411 W. LYKES AVENUE City-St-Zip: TAMPA, FL 33609

Title:

FLOWERS, ANITA Name: Address: 4052 DAVENTRY LANE City-St-Zip: PALM HARBOR, FL 34685

Title:

Name: RUESCHER, LINDA

3325 BAYSHORE BLVD., UNIT D-33 Address:

City-St-Zip: TAMPA, FL 33629

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH AKOK DENG **PRES** 08/20/2014