

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N10000004783

**FILED**  
**Oct 08, 2011**  
**Secretary of State**

**Entity Name:** FIRST STEP SOLUTIONS OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

10640 GRIFFIN RD., SUITE C-105  
COOPER CITY, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

10640 GRIFFIN RD., SUITE C-105  
COOPER CITY, FL 33328

**New Mailing Address:**

**FEI Number:** 27-2601953

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOODEN, JACQUELYN L ESQ.  
10640 GRIFFIN RD., SUITE C-105  
COOPER CITY, FL 33328 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:** JACQUELYN L, WOODEN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** WALKER, JESSICA L  
**Address:** 10640 GRIFFIN RD., SUITE C-105  
**City-St-Zip:** COOPER CITY, FL 33328

**Title:** D  
**Name:** LUMPKIN, LASHANDA  
**Address:** 9800 SHERIDAN ST., #105  
**City-St-Zip:** PEMBROKE PINES, FL 33024

**Title:** D  
**Name:** LUMPKIN, DOMENIQUE  
**Address:** 1410 SW 87 WAY  
**City-St-Zip:** PEMBROKE PINES, FL 33025

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:** LASHANDA LUMPKIN

MRS.

10/08/2011

Electronic Signature of Signing Officer or Director

Date