2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N12000010102

FILED Jun 30, 2014 Secretary of State

Entity Name: FEED MY LAMBS INTERNATIONAL MINISTRIES INC.

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

1126 LAKE DR COCOA, FL 32922

Current Mailing Address: New Mailing Address:

924 BRUNSWICK LN 1025 PORPOISE DRIVE ROCKLEDGE, FL 32955 ROCKLEDGE, FL 32955

FEI Number: 46-1144513 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

FULLER, LATARDRA
924 BRUNSWICK LN
ROCKLEDGE, FL 32955 US
FULLER, LATARDRA
1025 PORPOISE DRIVE
ROCKLEDGE, FL 32955 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: LATARDRA FULLER 06/30/2014

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: FULLER, LATARDRA
Address: 1126 LAKE DR
City-St-Zip: COCOA, FL 32922

Title: 7

Name: CANNION, SHARELLE Address: 1126 LAKE DR City-St-Zip: COCOA, FL 32922

Title: O

Name: BRYANT, BERNARD Address: 1126 LAKE DR City-St-Zip: COCOA, FL 32922

Title: C

Name: WILLIAMS, KEVIN Address: 1126 LAKE DR City-St-Zip: COCOA, FL 32922

Title: C

Name: RAULERSON, WENDELL

Address: 1126 LAKE DR City-St-Zip: COCOA, FL 32922

Title: VF

Name: FULLER, TERRENCE Address: 1126 LAKE DR City-St-Zip: COCOA, FL 32922

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: LATARDRA FULLER P 06/30/2014