2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N13000006871

Entity Name: MATEMORPHOSIS, INC

FILED Dec 16, 2014 Secretary of State

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

5337 N SOCRUM LOOP SUITE # 446 LAKELAND, FL 33809

Current Mailing Address: New Mailing Address:

5337 N SOCRUM LOOP SUITE # 446 LAKELAND, FL 33809

FEI Number: 46-1737957 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:

TYLER, JOHNNIE

5337 N SOCRUM LOOP

446

LAKELAND, FL 33809 US

CRUZ, BRIDGETTE

5337 N SOCRUM LOOP

446

LAKELAND, FL 33809 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: BRIDGETTE CRUZ 12/16/2014

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: F

Name: CRUZ, FRANKLIN

Address: 5337 N SOCRUM LOOP SUITE #446

City-St-Zip: LAKELAND, FL 33809 US

Title: VP

Name: CRUZ, BRIDGETTE

Address: 5337 N SOCRUM LOOP SUITE #446

City-St-Zip: LAKELAND, FL 33809 US

Title: DIR

Name: TYLER, ELSIE
Address: 1392 WYNGATE DR.
City-St-Zip: LAKELAND, FL 33809 US

Title: DIR

Name: TYLER, JONNIE
Address: 1392 WYNGATE DR.
City-St-Zip: LAKELAND, FL 33809 US

Title: DIR

Name: STRADER, STEPHEN Address: 5859 US HWY 98 N City-St-Zip: LAKELAND, FL 33809

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: BRIDGETTE CRUZ VP 12/16/2014