2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N18989

FILED Nov 09, 2009 Secretary of State

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Entity Na	me: IRISH CUI	TURAL INSTITUTE OF FLC	DRIDA, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ST COPANS RC O BEACH, FL 3				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	ST COPANS RC O BEACH, FL 3				
FEI Number	: 59-2780031	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
4166 NW 6 CORAL SE	PRINGS, FL 33		purpose of changing its register	ed office or registered agent, or both,	
		, opeodpe			
SIGNATU	RE: NANCY W	'. GREGOIRE c Signature of Registered Ag	nent	 Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () GREGOIRE, NAI 4166 NW 65 AVI CORAL SPRING	Ξ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () SMITH, MARIE 12015 GRIFFIN BISCAYNE PARI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () HYNES, SHEILA 1939 WEST COI POMPANO BEAG	PANS RD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: NANCY W. GREGOIRE PRES 11/09/2009