2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N21688

FILED Nov 15, 2010 Secretary of State

Entity Name: DADE COUNTY FEDERATION OF BLACK EMPLOYEES, INC.

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

6600 NW 27 AVE

W201

MIAMI, FL 33147 US

Current Mailing Address: New Mailing Address:

6600 NW 27 AVE

W201

MIAMI, FL 33147 US

FEI Number: 65-0522772 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:

FAISON, TIMOTHY 24182 SW 112 COURT MIAMI,, FL 33032 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: TIMOTHY FAISON

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: FAISON, TIMOTHY
Address: 24182 SW 112 COURT
City-St-Zip: MIAMI,, FL 33032

Title: 1VP

Name: JOHNSON, DUTHIE Address: 19430 NW 23 AVENUE City-St-Zip: MIAMI, FL 33056

Title: VP

Name: COX, VICTORIA Address: 6600 NW 27 AVE City-St-Zip: MIAMI, FL 33147

Title: VP

 Name:
 FAISON, TIMOTHY

 Address:
 24182 SW 112 COURT

 City-St-Zip:
 MIAMI, FL 33032

Title: ST

Name: BESS,, LAPRINCESS

Address: 1646 NW 1ST PLACE APT 1 PH

City-St-Zip: MIAMI,, FL 33136

Title: VP

 Name:
 DENT, BARBARA F

 Address:
 16603 SW 99 PLACE

 City-St-Zip:
 MIAMI, FL 33157

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: TIMOTHY FAISON PRES 11/15/2010