2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N39334

Entity Name: NEW SHILOH SERVICE CORPORATION

FILED Dec 17, 2009 Secretary of State

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

1350 N.W. 95TH STREET MIAMI, FL 33147

Current Mailing Address: New Mailing Address:

1350 N.W. 95TH STREET MIAMI, FL 33147

FEI Number: 65-0212612 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:

BOREN, BARRY M ESQ.
9200 S. DADELAND BLVD.
4412
MIAMI, FL 33156 US
POWELL, DALE L REV.
2497 SW 126 WAY
MIRAMAR, FL 33027 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: REV. DALE L. POWELL 12/17/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 POWELL, D.L
 Name:
 POWELL, DALE L

 Address:
 1350 N.W. 95TH STREET
 Address:
 1350 N.W. 95TH STREET

 City-St-Zip:
 MIAMI, FL 33147
 City-St-Zip:
 MIAMI, FL 33147

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 ALEXANDER, MAXINE
 Name:
 HEAVEN, NATALIE

 Address:
 1350 N.W. 95TH STREET
 Address:
 1350 N.W. 95TH STREET

 City-St-Zip:
 MIAMI, FL 33147
 City-St-Zip:
 MIAMI, FL 33147

Title: T () Delete Title: () Change () Addition
Name: PETTAWAY, CLYDE Name:

 Name:
 PETTAWAY, CLYDE
 Name:

 Address:
 1350 NW 95 ST
 Address:

 City-St-Zip:
 MIAMI, FL 33147
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf SD} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 LOVETT, BRENDETTE
 Name:
 WRIGHT, JR., ARTHUR

 Address:
 1350 NW 95 ST
 Address:
 1350 NW 95 ST

 City-St-Zip:
 MIAMI, FL 33147
 City-St-Zip:
 MIAMI, FL 33147

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: REV. DALE L. POWELL PD 12/17/2009