

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

N44916
The Holy Order of Cherubim &
Seraphim Church Movement
of Florida, Inc.

2. Principal Office Address

1925-33

Opalocka Blvd

Suite, Apt. #, etc.

City & State

Opalocka Florida

Zip

33054

Country

U.S.A.

3. Mailing Office Address

1925-33 Opalocka Blvd

Suite, Apt. #, etc.

City & State

Opalocka Florida

Zip

33054

Country

U.S.A.

REINSTATEMENT 04-01

4. Date Incorporated or Qualified
To Do Business in Florida

8-29-91 SP

5. FEI Number

65-0287048

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Morenike Owolabi

Street Address (P.O. Box Number is Not Acceptable)

1925-33 Opalocka Blvd

Suite, Apt. #, Etc.

Opalocka, FL

City

Opalocka

700003828897-6

-03/09/01-01116-001

****173.75 ****173.75

700003828897-6

-03/09/01-01116-002

****500.00 ****500.00

State
FL

Zip
33054

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date 02-01-01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Stephen O. Adetona	1925-33 Opalocka Blvd	Opalocka, FL 33054
T	Blodun Williams	1925-33 Opalocka Blvd	Opalocka, FL 33054
D	Tunde Owolade	1925-33 Opalocka Blvd	Opalocka, FL 33054
D	Kola Adeleke	1925-33 Opalocka Blvd	Opalocka, FL 33054
T	Morenike Owolabi	1925-33 Opalocka Blvd	Opalocka, FL 33054
T	Rosemary Abimbola	1925-33 Opalocka Blvd	Opalocka, FL 33054

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

S.O. Adetona STEPHEN O. ADETONTA

Date

02/01/01 (305) 769-5312

Daytime Phone #