2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000005018

FILED Nov 11, 2008 Secretary of State

Entity Name: SANCTIFIED CHURCH OF GOD, INC. **Current Principal Place of Business: New Principal Place of Business:** 6033 KIMBERLY BLVD NORTH LAUDERDALE, FL 33065 US **Current Mailing Address: New Mailing Address:** 2621 NW 116TH TERRACE 2621 NW 116TH TERRACE CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065 US FEI Number: 65-0530942 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GELIN, FRITZNEL PASTOR **2621 NW 116TH TERRACE** CORAL SPRINGS, FL 33065 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: FRITZNEL GELIN Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GELIN, FRITZNEL PASTOR Name: Name: C/O 2621 NW 116TH TERRACE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: Title: () Delete Title: () Change () Addition GELIN, MAGALIE Name: Name: Address: 25621 N.W. 116TH TERRACE Address: City-St-Zip: CORAL SPRINGS, FL 33065 US City-St-Zip: Title: DVP () Delete Title: () Change () Addition DIEULAINE, VERES Name: Name: 5981 N.W. 24 PLACE Address: Address: City-St-Zip: SUNRISE, FL 33313 US City-St-Zip: Title: () Delete Title: () Change () Addition COMPERE, JUDIA DECON Name: Name: Address: 2611 N.W. 59 AVENUE Address: City-St-Zip: MARGATE, FL 33063 US City-St-Zip: Title: D/SC () Delete Title: () Change () Addition PATRICK, JEAN-BAPTISTE DECON Name: Name: 5519 SW 7TH STREET Address: Address: City-St-Zip: MARGATE, FL 33068 US City-St-Zip:

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: FRITZNEL GELIN PAST 11/11/2008