PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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REINSTATEMENT 97-02

DOCUMENT # N 96000005664

1. Corporation Name
INDEPENDANT MISSION CHURCH OF GOD BETHEL BY THE FAITH INTERNATIONAL, INC.

2. Principal Office Address	3. Mailing Office Address
3416 NW 7th Avenue	3416 NW 7th Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33127 Country: USA	Zip: 33127 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 11/05/1996

5. FEI Number: 65-0748950 — 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: Mercilus JEAN

Street Address (P.O. Box Number is Not Acceptable): 81 NE 53 Street

Suite, Apt. #, Etc.:

City: MIAMI State: FL Zip Code: 33137

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: Mercilus Jean — REGISTERED AGENT MUST SIGN — Date: 12-28-01

CR2E081 (9/01)

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
DP	Mercilus JEAN	81 NE 53 Street	MIAMI FL 33137
DT	Lisa Jeudi MOISE	P.O. Box 370446	MIAMI FL 33137
DS	Vertile G. JEAN	P.O. Box 370446	MIAMI FL 33137
			1/11/02

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: Mercilus Jean Mercilus JEAN President — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 12/28/01 — Daytime Phone #: (305) 751-4118