2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000006710

Entity Name: UNITED 7TH DAY CHURCH OF GOD, INC.

FILED Oct 23, 2008 Secretary of State

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

6140 N.W. 11TH STREET

SUNRISE, FL 33313 US

Current Mailing Address: New Mailing Address:

1909 HAVERHILL RD, 1072 MADISON CHASE APT 7 APT 2

WEST PALM BEACH, FL 33417 US WEST PALM BEACH, FL 33411 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BROWN, BRUKIE

1909 HAVER HILL RD

BROWN, BRUKIE

1072 MADISON CHASE

WEST PALM BEACH, FL 33417 US 02 WEST PALM BEACH, FL 33411 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: BRUKIE BROWN 10/23/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BROWN, BRUKIE
 Name:
 BROWN, BRUKIE

 Address:
 1909 HAVER HILL RD
 Address:
 1072 MADISON CHASE
 APT 02

City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: VD () Delete Title: VD (X) Change () Addition Name: CARLINGTON, GOFFE Name: BURKE, ROSEALEE

Address: 1473 LAKE CRYSTAL DRIVE #D Address: 1072 MADISON CHASE APT 02
City-St-Zip: WEST PALM BEACH, FL 33411
City-St-Zip: WEST PALM BEACH, FL 33411

Title: STD () Delete Title: STD (X) Change () Addition Name: BURKE, ROSALEE Name: DOREEN, NELSON

Address: 1909 HAVER HILL RD Address: 1091 FAIR FAX CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST BOYNTON BEACH, FL 33436

Title: D () Delete Title: () Change () Addition

 Name:
 LIVINGSTON, KATHLEEN
 Name:

 Address:
 2974 NW 92 STREET
 Address:

 City-St-Zip:
 MIAMI, FL
 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: ROSEALEE BURKE VD 10/23/2008