2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 08, 2012
Secretary of State

DOCUMENT# N98000005952

Entity Name: SOCIAL REANIMATION, INC.

Current Principal Place of Business:

19030 SW 10TH STREET
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

19030 SW 10TH STREET
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 65-0876172 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, LYNN A
19030 SW 10TH STREET
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

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: LYNN A. WILLIAMS

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD
Name: WILLIAMS, LYNN A
Address: 19030 SW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: SD
Name: STEWART, EGERTHA T
Address: 19030 SW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: TD
Name: WILLIAMS, SHELIA E
Address: 19030 SW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: TD
Name: STROZIER, ARTAVIA
Address: 606 MUNDYS MILL RD
City-St-Zip: JONESBORO, GA 30238

I hereby 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 all other like empowered.

SIGNATURE: LYNN A. WILLIAMS PD 10/08/2012

Electronic Signature of Signing Officer or Director — Date