

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000000882

FILED
Mar 02, 2010
Secretary of State

Entity Name: SOUTH FLORIDA CHAPTER, INCORPORATED. BPA

Current Principal Place of Business:

15800 NORTHWEST 42AVE
MIAMI, FL 33054

New Principal Place of Business:

15800 NORTHWEST 42 AVE
MIAMI GARDENS, FL 33054 US

Current Mailing Address:

P.O. BOX 522195
OPA LOCKA, FL 33055

New Mailing Address:

P.O. BOX 522195
MIAMI GARDENS, FL 33055 US

FEI Number: 65-0890987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

JOHNSON, ARTHEMON SEC
2412 N.W. 108 STREET
MIAMI, FL 33167 US

Name and Address of New Registered Agent:

JOHNSON, ARTHEMON
2412 NW 108 STREET
MIAMI, FL 33167 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: ARTHEMON JOHNSON

03/02/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SINGLETARY, CARLENTINE
Address: 8850 NW 3 STREET
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: TD
Name: SHANNON, FRENCH
Address: 2340 NW 72 AV # 206
City-St-Zip: SUNRISE, FL 33313 US

Title: SD
Name: JOHNSON, ARTHEMON
Address: 2412 NW 108 ST
City-St-Zip: MIAMI, FL 33167 US

Title: OD
Name: FLOWERS, CHARLES
Address: 1000 NORTH RIVER DRIVE # 106
City-St-Zip: MIAMI, FL 33136 US

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: ARTHEMON JOHNSON

SD

03/02/2010

Electronic Signature of Signing Officer or Director

Date