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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
01 FEB -9 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N99000005531

1. Corporation Name: Eglise Evangelique de L'Alliance of West Palm Beach, Inc.

REINSTATEMENT 00-01

2. Principal Office Address	3. Mailing Office Address
6108 S. Dixie Hwy	P.O. Box 20088
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: West Palm Beach, Fl.	City & State: West Palm Beach, Fl.
Zip: 33405 Country: Palm Beach	Zip: 33416 Country: Palm Beach

4. Date Incorporated or Qualified To Do Business in Florida: 9-13-99

5. FEI Number: [X] 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: Kenneth D. Laney

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-02/21/01--01040--023
****297.50 ****297.50

Street Address (P.O. Box Number is Not Acceptable): 7800 Lake Worth Road

Suite, Apt. #, Etc.:

City: Lake Worth | State: FL | Zip Code: 33467

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: Kenneth D. Laney — REGISTERED AGENT MUST SIGN

Date: 02/8/01

CR2E081 (9/00)

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
P	Wilson E. Pierre	145 806 White Road	Royal Palm Beach, Fl. 33411
D	Sera Sagaille	719 Exec. Center Dr. # 311E	West Palm Beach, Fl. 33401
D	Elicon Merisier	712 Park Place	West Palm Beach, Fl. 33401
D	Marie Franzie Herve	4645 Carthage Circle S.	Lantana, Fl. 33463
D	Ducas Daceus	3789 Mil-pond Ct.	Green Acres, Fl. 33463

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: Wilson E. Pierre — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 2-8-01

Daytime Phone #: (561) 790-2836