| SIGNATURE | : CHARLES E. WILLIAMS | | | 03/22/2016 |
|---------------------------|--|-----------------|----------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | PD | Title | STD | |
| Name | WILLIAMS, CHARLES E | Name | SHARP, RENA | |
| Address | 4628 PALM BEACH BLVD | Address | 4628 PALM BEACH BLVD | |
| City-State-Zip: | FORT MYERS FL 33905 | City-State-Zip: | FORT MYERS FL 33905 | |
| Title | D | | | |
| Name | SHEILDS, KATHY | | | |
| Address | 4628 PALM BEACH BLVD | | | |
| City-State-Zip: | FORT MYERS FL 33905 | | | |

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: CHARLES E.WILLIAMS

Electronic Signature of Signing Officer/Director Detail

Entity Name: CHURCH OF JESUS CHRIST ON PALM BEACH INC.

2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

Current Principal Place of Business:

4628 PALM BEACH BLVD FORT MYERS. FL 33905

Current Mailing Address:

DOCUMENT# N14000007885

4628 PALM BEACH BLVD FORT MYERS. FL 33905

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

WILLIAMS, CHARLES E SR. 13302 WINDING OAKS BLVD SUITE A TAMPA, FL 33612 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.

Of Tit Na Ado Citv Titl Na Add

FILED Mar 22, 2016 Secretary of State CR4802500787

Certificate of Status Desired: Yes

PASTOR