

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6384

8881011

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____


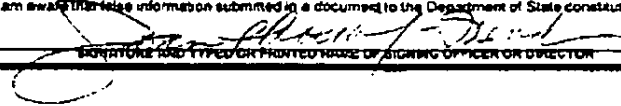
**CORPORATION REINSTATEMENT
ADF ENERGY TRUST, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,500.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P07000095166					
1. Corporation Name ADF ENERGY TRUST, INC.					
2. Principal Office Address - No P.O. Box # 11712 Jefferson Ave #268C <small>State, Apt #, etc.</small>			3. Mailing Office Address 11712 Jefferson Ave #268C <small>State, Apt #, etc.</small>		
City & State Newport News, VA		City & State Newport News, VA		4. Date Incorporated or Qualified To Do Business in Florida August 23, 2007	
Zip 23606	Country USA	Zip 23606	Country USA	5. FEI NUMBER <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> NOT Applicable	
7. Name and Address of Current Registered Agent Name NRAI Services, Inc. Street Address (P.O. Box Number is NOT Acceptable) 1200 S. Pine Island Road <small>State, Apt #, ETC.</small>				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$9.75 Additional Fee required for a Certificate of Status	
City Plantation		State FL	Zip Code 33324		
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: Katei Womack, Asst. Sec. Date: 9/3/2013 REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
CEO	JOAN PHOENIX-FRENCH	11712 Jefferson Ave #268C		Newport News, VA 23606	
COO	JOHNNY A. FRENCH	7104 Terrell Lane		Hampton, VA 23667	
ADM	CLEVELAND GAINES-PHOENIX	7104 Terrell Lane		Hampton, VA 23667	
10. E-mail Address: joanrpf@gmail.com <small>(To be used for future annual report notifications)</small>					
11. 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. and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.					
SIGNATURE: 				Date: 8/30/2013 (757) 349-2318	

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