

August 11, 2000

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Division of Corporations 409 East Gaines St. Tallahassee, FL 32399 FILED

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SECRETARY OF STATE
TALL ALASSES

### Attn Registration Section Technician:

Enclosed you will find:

- Our organization's check for \$87.50
- An Original Certificate of Existence from Sec. of State, Jim Miles of South Carolina
- The Registration Form for Authorization to Conduct Affairs in Florida

I called your office at 1:30 PM today to ask a question about a question on the form and was instructed to send this form to the <u>Registration Section</u> rather than the Section listed on the transmittal letter. I hope this is correct.

Please contact me If you have any further questions. My phone number is listed above.

Sincerely.

Michael L. Hill

Ençí.

#### TRANSMITTAL LETTER

TO: Qualification/Registration Section Division of Corporations

Dear 5ir of Madam:
The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.
Please return all correspondence concerning this matter to the following:
MICHABL L. HILL
(Name of Person)
THE DOVE CENTER, INC. / DOVE SHORES
14520 PERDIDO KEY, DENG
(Address)
PENSACOLA, FL 32507 (City, State and Zip Code)
(City, State and Zip Code)
For further information concerning this matter, please call:
MICHAEL L. HILL at (850) 492 3683  (Name of Person) Area Code & Daytime Telephone Number
(Name of Person)  Area Code & Daytime Telephone Number
STREET ADDRESS:  Qualification/Tax Lien Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  MAILING ADDRESS:  Qualification/Tax Lien Section  Division of Corporations  P. O. Box 6327  Tallahassee, FL 32314
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee   ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & Certificate of Status

## APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

THE DOVE CENTER, WEERPORTED	
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present, "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)	
2. Suite or country under the law of which (State or country under the law of which it is incorporated)  (State or country under the law of which (FEI number, if applicable)	
4. October 21, 1987 5. PERPOTUAL  (Date of Incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual")	
6. UPON QUALIFICATION  (Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)	
7. 454 S. Anderson Road, BTC 542 Jaite 122	
Rock Hill, 5C 25730  (Current mailing address)  Keligious, Educational, Social, Frakernal, Charita Stephens of the control of	
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	
9. Name and street address of Florida registered agent:	ED
Michael L. Hill STAH 8  14520 PERPIPO KEY DELVE (Office address)	
PENSALULA , Florida, 32507 (City) (Zip Code)	
10. Registered agent's acceptance:	

10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached as a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other

official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

NAMES and addresses of officers and/or directors: (Street address only-1 NOT acceptable)	P.O. Box			-
A. DIRECTORS (Street address only-P. O. Box NOT acceptable)				
Chairman: MICHAEL L. Hu	ar ii ista		er Lila	Turkaya ya Karana
Address: 14520 PERDIDO KET DRIVE				
PENSACOLA, FL 32507			-	
Vice Chairman: SHARON P. Huu	<del>-</del> ·			an granagagare entre
Address: 14520 PERDIDOKEY DRIVE	ស្ថិត ប៉ុស្ស	٠.		
PENSACULA, FL 32507	• • •			•
Director: MELONIE N. Smomers	. tred.	۰۰, تو	5 ·	± .* -
Address: 4600 AMBERSIDE DRIVE		•	• •	
lock thu, SC 29732	•			-
Director: Waynet Wooten, CPA	ي المحمد الله الداليدي		, 1 <sub>2</sub>	Ka≇us Into te s
Address: 1594 Lands And Rd.	eren to the	a Time	: 54:15	위 <i>원</i> (원조 택
Rock Hu, SC 29732				
B. OFFICERS (Street address only- P. O. Box NOT acceptable)	* * * * * * * *	12 (4.19)	• •	<del> </del>
President: SHARON P. HILL				
Address: 14520 PENDIDO NET DOLVE		25		
Pensacola, FL 32507			-	
Vice President: MELONE N. SMOHERS		AUG 2	-17	
Address: 4600 Ambersine Drive		24		
Rock How. SC 29732	72	P	ED	
Secretary: Muhgel L. Hick	<u> </u>	, ci		
Address: 14520 PERDIDO KEY DRIVE, Pensacoh FL	311	ŏ	-	
Tressurer: Mulauel L. Hill		• ·		
Address: 4520 PERDIDO KEY DRIVE, Pensacola FL	ਲ ਨੇ ਮਿਲਮਿ	*. * * *	Etypt L	eo <del>ran</del> (1776), o <sup>®</sup> ia
NOTE: If necessary, you may attach an addendum to the application listing addition			1 1	
and/or directors additional and/or directors additional and/or directors additional and/or directors and/or directors additional and/or directors and/or direct	iai officers	i i		•
13. Albarat				
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	7 .7 5 85	,	. 12	글 = = : 1명 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (
MICHAEL L. HILL CHAIRMAN (Typed or printed name and capacity of person signing application)				
(-) reson thanks and capacity of person signing application)				

## The State of South Carolina



# Office of Secretary of State Jim Miles Certificate of Existence, Non-Profit Corporation

I, Jim Miles, Secretary of State of South Carolina Hereby certify that:

DOVE CENTER, INC. THE, A Non-Profit Corporation duly organized under the laws of the State of South Carolina on October 21st, 1987, has as of the date hereof filed as a non-profit corporation for religious, educational, social, fraternal, charitable or other eleemonsynary purpose, and has paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-31-1404 of the South Carolina code and that the non-profit corporation has not filed articles of dissolution as of the date hereof.

> Given under my Hand and the Great Seal of the State of South Carolina this 17th day of July, 2000.

> > Jim Miles, Secretary of State