

F0700005155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

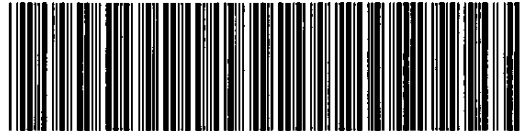
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200106970172

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 OCT 11 AM 11:10

FILED

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

07 OCT 11 AM 10:40

RECEIVED

10/18
10/10
10/10
10/10
10/10



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 12, 2007

CORPORATION SERVICES COMPANY

SUBJECT: ADVENTURES IN FAITH MINISTRIES, INC.
Ref. Number: W07000050686

We have received your document for ADVENTURES IN FAITH MINISTRIES, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Regulatory Specialist II
New Filing Section

Letter Number: 607A00060174



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 260398 7601977
AUTHORIZATION : *Susie Knight*
COST LIMIT : \$ 70,000

ORDER DATE : October 5, 2007
ORDER TIME : 9:30 AM
ORDER NO. : 260398-005
CUSTOMER NO: 7601977

FOREIGN FILINGS

NAME: ADVENTURES IN FAITH MINISTRIES
INC.

XXXX QUALIFICATION (TYPE: ~~NP~~) P

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER: _____

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. ADVENTURES IN FAITH MINISTRIES, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NORTH CAROLINA

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. 9-15-1983

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1301 TRUMAN AVE. APT 5, Key West, FL 33040
(Principal office address)

PO BOX 103 SMYRNA, NC 28579

(Current mailing address)

8. RELIGIOUS WORK, WORSHIP AND RELATED ACTIVITIES
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

FILED
07 OCT 11 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Corporation Service Company

By: Sue G. Knight
(Registered agent's signature)

Sue G. Knight
as its agent

11. Attached is 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.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: EVELYN BATTIS DERRETH

Address: 1301 TRUMAN AVE APT 5
KEY WEST, FL 33040

Vice Chairman: EVELYN D. LEWIS

Address: 152 HIGHWAY 70 E
SMYRNA, NC 28579

Director: REV. RICHARD J. DERRETH

Address: 1301 TRUMAN AVE. APT 5
KEY WEST, FL 33040

Director: _____

Address: _____

B. OFFICERS

President: EVELYN BATTIS DERRETH

Address: 1301 TRUMAN AVE. APT. 5
KEY WEST, FLORIDA 33040

Vice President: EVELYN D. LEWIS

Address: 152 HIGHWAY 70 E
SMYRNA, NC 28579

Secretary: RICHARD J. DERRETH

Address: 1301 TRUMAN AVE APT 5 KEY WEST, FL 33040

Treasurer: RICHARD J. DERRETH

Address: 1301 TRUMAN AVE APT 5 KEY WEST, FL 33040

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Evelyn Battis Derreth
(Signature of Director or Officer listed in number 12 of the application)

14. EVELYN BATTIS DERRETH, PRESIDENT
(Typed or printed name and capacity of person signing application) COB

FILED
07 OCT 11 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

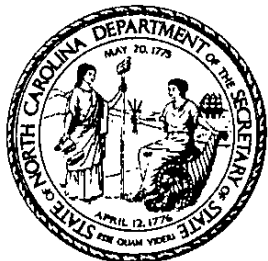
I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

ADVENTURES IN FAITH MINISTRIES, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 15th day of September, 1983 , with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

FILED
07 OCT 11 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 10th day of October, 2007.

Elaine F. Marshall

Secretary of State