

FISDU00001267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

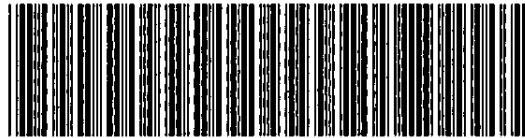
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

MAR 26 2015

T. SCOTT



200270938872

03/24/15--01028--007 **87.50

15 MAR 24 AM 11:10
RECEIVED
MAR 24 2015

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CALVARY SERVICES INC

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MARIA BRESCH-DEJESUS

Name of Person

CALVARY SERVICES INC

Firm/Company

4905 NE 1ST TER

Address

POMPANO BEACH, FL 33064

City/State and Zip code

mbreschdej@calvaryservicesinc.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LORRAINE EDWARDS at (954) 740-4889

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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 & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. **CALVARY SERVICES 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. **WISCONSIN**

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

3. **47-2741739**

(FEI number, if applicable)

4. **1/7/2015**

(Date of incorporation)

5. **perpetual**

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

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

7. **4905 NE 1ST TER, POMPANO BEACH, FL 33064**

(Principal office address)

4905 NE 1ST TER, POMPANO BEACH, FL 33064

(Current mailing address)

15 MAR 24 AM 11:10

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

Name: **LORRAINE EDWARDS**

Office Address: **5915 NW 21ST STREET**

LAUDERHILL, Florida **33313**

(City)

(Zip code)

9. 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)

10. 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.

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

A. DIRECTORS

Chairman: ISAAC BLAND

Address: 1447 WINDLAKE AVE
MILWAUKEE, WI 53215

Vice Chairman: MARIA BRESCH-DEJESUS

Address: 4905 NE 1ST TER
POMPANO BEACH, FL 33064

Director: LORRAINE EDWARDS

Address: 5915 NW 21ST STREET
LAUDERHILL, FL 33313

Director: DAVID KILE

Address: 601 N PEARL ST
SHAMOKIN, PA 17872

B. OFFICERS

President: LORRAINE EDWARDS

Address: 5915 NW 21ST STREET
LAUDERHILL, FL 33313

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: MARIA BRESCH-DEJESUS

Address: 4905 NE 1ST TER, POMPANO BEACH, FL 33064

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

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is 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.

13. MARIA BRESCH-DEJESUS, VICE CHAIRMAN

(Typed or printed name and capacity of person signing application)

United States of America
State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I, GEORGE PETAK, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

CALVARY SERVICES INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is January 7, 2015.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on February 27, 2015.

A handwritten signature in cursive script that reads "George Petak".

GEORGE PETAK, Administrator
Division of Corporate and Consumer Services
Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: <http://www.wdfi.org/apps/ccs/verify/>

Enter this code: **149958-C7EB38DB**