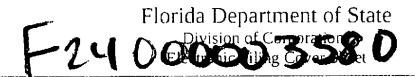
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Page: 1/4

Division of Corporations

Fax: 8134365206



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (813)436-5206

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FOREIGN PROFIT/NONPROFIT CORPORATION Another Well Ministries Inc.

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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 CONDUCTITS AFFAIRS IN THE STATE OF FLORIDA:

North Carolina (State or coun	try under the law of which it is incorporated	name adopted for the purpose of transacting business in Florida) 3. 88-1978026 (FEI number, if applicable)	
North Carolina (State or coun 05/05/2022	try under the law of which it is incorporated	3. 88-1978026 (FEI number, if applicable)	
(State or coun 05/05/2022	try under the law of which it is incorporate	ed) (FEI number, if applicable)	
05/05/2022 (D			•
(D		5	
	ate of Incorporation)	5. (Date of duration, if other than perpetual)	-
· D · · · · · · · · · · · · · · · · · ·		See sections 617 1501 & 617,1502, F.S. to determine penalty liabit	
		see verming at easily to arrive are, and, 1 st, no assistance formal mann	
7901 4th St N S	STE 300 St. Petersburg FL 33702	<u> </u>	_
	(Principal	office street address)	
	TT 000 0: 5 : 4 . Ft 00700		
7901 4th St N S	TE 300 St. Petersburg FL 33702		_
	(Curent man	ling address, it different)	
Religious Nonn	rofit Oragnization		
76THE TENEDOUS TOTAL	amount of a supported by home clate or com	intry to be carried out in the state of Florida) (6) 😝 😝	-
Name and stre	et address of Florida registered agent: ((P.O. Box NOT acceptable)	
rvame and sire	er deniess of Frontida registered again.		
	Northwest Registered Agent LLC	n l	
Name:	TOTHINGS TREGISTED TIGGIN 220	(P.O. Box NOT acceptable) (P.O. Box NOT acceptable) (P.O. Box NOT acceptable) (Zip Code) (Zip Code) (Zip Code)	
ffice Address:	7901 4th St N STE 300		
	St. Petersburg	Florida 33702 Florida Co	,
•	(City)	(Zip Code)	,
			>
A Registered	adent's accentance'		nlace
0. Registered <i>aving been na</i>	agent's acceptance: med as registered agent and to accept:	service of process for the above stated corporation at the	prace
0. Registered aving been na- ecionated in th	med as registered agent and to accept is application. I hereby accept the application.	service of process for the above stated corporation at the pointment as registered agent and agree to act in this capa	ichy.
 Registered aving been na- esignated in this other agree to 	med as registered agent and to accept is application. I hereby accept the application.	pointment as registered agent and agree to act in this capa utes relative to the proper and complete performance of m	ichy.

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.

7/3/2024 07:23 54 PDT , To: 18506176383 Page: 3/4 Fax: 8134365206

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOR	Name:	⊔Chairman	Name:			
□Vice Chairman	Address:	□ Vice Chairman	Address: -			
☑Director	7901 4th St N STE 300	□Director				
□President	St. Petersburg FL 33702	□President				
□Vice President		□ Vice President				
Secretary	□Treasurer	Secretary	□Treasurer			
□Other:	Other:	□Other:	Other:			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□ Vice Chairman	Address:			
□Director		□ Director				
□President		□ President				
□Vice President		□Vice President				
☐ Secretary	☐ Freasurer	□ Secretary	☐ Treasurer			
□Other:	Other:	□Other:	Other:			
□Chairman	Name:	□ Chairman	Name.			
□Vice Chairman	Address:	□ Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□ Secretary	□Treasurer	☐ Secretary	☐ Treasurer			
□Other:	☐ Other:	□Other:	Other:			
NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 13. Janed Dyson (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Jared Dyson - Director						



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

ANOTHER WELL MINISTRIES INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 5th day of May, 2022, 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.





Scan to verify online.

Elaine I Marshall

of Raleigh, this 3rd day of July, 2024.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City

Secretary of State