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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
7/12

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: Not for Profit Certificate of Domestication

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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FROM: Becki Miller - New Beginnings Healing Center, Inc.
Name (printed or typed)

319 Wayne Ave.
Address

Defiance, Ohio 43512
City, State & Zip

419-782-8591
Daytime Telephone Number

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NOT FOR PROFIT
CERTIFICATE OF DOMESTICATIONSECRETARY OF STATE
TALLAHASSEE, FLORIDAThe undersigned, Becki Miller, Vice-President
(Name) (Title)of New Beginnings Healing Center, Inc. a foreign Corporation,
(Corporation Name)

in accordance with section 617.1803, Florida Statutes, does hereby certify.

1. The date on which corporation was first formed was December 30, 1981.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Defiance, Ohio 43512.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was New Beginnings Healing Center, Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 617.01201 and 617.0202 with this certificate is New Beginnings Healing Center, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Defiance, Ohio 43512.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 617.1803.

I am Becki Miller, of New Beginnings Healing Center, Inc.and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 15th day of MAY, 2006.Becki Miller

(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S. (Not for Profit)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

New Beginnings Healing Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address shall be:

*212 W. Michigan St.
Orlando, FL 32806*

ARTICLE III PURPOSE

The purpose for which the corporation is organized:

To operate exclusively for religious, charitable, educational and distinct ecclesiastical purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1954, as amended, or any superseding statute thereto.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

By majority vote of the Board of Trustees

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

The name(s) and address(es) and specific title(s):

*Pastor Jonathan Miller, Pastor/President, 212 W. Michigan St., Orlando, FL 32806
Pastor Rebekah Miller, Vice President, 212 W. Michigan St., Orlando, FL 32806
Mark Arthur, Secretary/Treasurer, 212 W. Michigan St., Orlando, FL 32806*

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

*Scott Taylor
3704 Oakview Dr
Orlando, FL 32812*

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

*Becki Miller
212 W. Michigan St.
Orlando, FL 32806*

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Scott Taylor

Signature/Registered Agent

5/15/06

Date

Becki Miller

Signature/Incorporator

5/15/06

Date