

F00000001778

TRANSMITTAL LETTER

TO: Qualification/Registration Section
Division of Corporations

SUBJECT: NEW LIFE SPIRITUAL RENEWAL CENTERS, INC.
(Name of Corporation)

300003184073--6
-03/24/00--01128--010
*****70.00 *****70.00

Dear Sir or 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:

DELIA MASON
(Name of Person)

NEW LIFE CLINICS
(Firm/Company)

820 W. SPRING CREEK PARKWAY #400
(Address)

PLANO, TX 75023
(City, State and Zip Code)

FILED
00 MAR 24 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Name	DELIA MASON	at (972) 424 - 1900 ext 196
Availability	(Name of Person)	Area Code & Daytime Telephone Number
Document Examiner	DCC	
Updater	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
Verifier	DCC	
Enclosed is a check for the following amount:		
Amount	DCC	
W. P. Verifier	DCC	

☒ \$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

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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 CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:*

1. NEW LIFE SPIRITUAL RENEWAL CENTERS, INC.
(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. CALIFORNIA 3. 75-2845878
(State or country under the law of which it is incorporated) (FEI number, if applicable)
 4. 7/14/99 5. PERPETUAL
(Date of Incorporation) (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. 820 W. SPRING CREEK PARKWAY, #400
PLANO, TEXAS 75023
(Current mailing address)
- This corporation is a nonprofit public benefit corporation organized under the California Nonprofit Public Benefit Corporation Law for charitable purposes.
8. Corporation authorized in home state or country to be carried out in the state of Florida)
(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:

PRISCILLA KELLY
(Name)

1850 LEE ROAD, #323
(Office address)

WINTER PARK, Florida, 32789
(City) (Zip Code)

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.

Priscilla Kelly
(Registered agent's signature)

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

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TALLAHASSEE, FLORIDA

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

12. Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: STEVE ARTERBURN

Address: 570 GLENNEYRE #107

LAGUNA BEACH, CA 92651

Vice Chairman: _____

Address: _____

Director: DON CARTMELL

Address: 258 GREEN HEATH PLACE

THOUSAND OAKS, CA 91361

Director: JOHN BAKER

Address: 23456 MADERO, SUITE 100

MISSION VIEJO, CA 92691

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: STEVE ARTERBURN

Address: 570 GLENNEYRE #107

LAGUNA BEACH, CA 92651

Vice President: _____

Address: _____

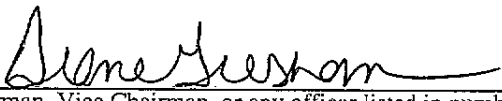
Secretary: DIANE GRESHAM

Address: 820 W. SPRING CREEK PARKWAY #400 PLANO, TX 75023

Treasurer: DIANE GRESHAM

Address: 820 W. SPRING CREEK PARKWAY #400 PLANO, TX 75023

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

DIANE GRESHAM, SECRETARY & TREASURER
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of California

SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, **BILL JONES**, Secretary of State of the State of California, hereby certify:

14th

July

That on the _____ day of _____, 19 _____,

NEW LIFE SPIRITUAL RENEWAL CENTERS, INC.

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this
certificate and affix the Great Seal of
the State of California this day of
February 11, 2000



Bill Jones

Secretary of State

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00 MAR 24 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA 32310