F00000003182

TRANSMITTAL LETTER

TO: Qualification/Registration Section
Division of Corporations SUBJECT: Vision Street Outreach Ministries, Inc. (Name of Corporation)
SUBJECT: VISION STEET (Name of Corporation)
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:
Tracie L Beard Es 8
Vision Street Outreach Ministries Inc
P. O. Box 248
Iron City GA 31759 with
For further information concerning this matter, please call: -06/02/00-01098-006 *****78.75 *****78.75
Tracie Beard at 912 534 - 5309 (Name of Person) at Ode & Daytime Telephone Number
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
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy

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:

11. Of In Knich Ministries Time			, i, e
1. VISION STREET OUTVENCY MINISTRES, LICE (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or		-	= -
(Name of corporation: must include the word in NCOKI OKATED of a corporation instead of a natural 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. Grant or country lunder the law of which (FEI number, if applicable)	•	- ·	<u>.</u>
(State or country under the law of which it is incorporated) (FEI number, if applicable)			
. Seat 1997 5 Na			16. 2~
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")			
5 June 2000		r- 1	
(Date corporation first conducted Affairs in Florida -	77. *	. 	
See sections 617.1501, 617.1502, and 817.155, F.S.)		- 1200 -	
7. 4 0 DOX 248			٠
Iron City, GA 31759	_		
(Current mailing address)	00	- =	
C. L. and and a second	<u></u>		
8. NON DYDIT COLLEGATIONAL (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	- 1	granger P	=
	** *** **	- 15 mg	
9. Name and street address of Florida registered agent:	ج		
Kayron GodWin	29		
(Name)	•		
4289 allen Street		· · · · · · · · · · · · · · · · · · ·	
(Office address)			
Green wood, Florida, 32443			
(City) (Zîp Code)		-	•
10. Registered agent's acceptance:	1		
Having been named as registered agent and to accept service of process for the above star	zea S		

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) 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 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: Gerald J. Beard	
Address: 1200 S Knox Avenue	
Donalsonville, GA 31745	
Vice Chairman: Rickey Coach man	i tuan
Address: 808 East 11th Street	
Domisonville, GA 31745	*
Director: Chuck McCullum	
Address: 1203 Hornsby St., Donalsonville, GA	
Donalsonville GA 31745	
Director: Alicia Ward	FEF
Address: 307 S. Morris Avenue	
Donalsonville GA 31745	
B. OFFICERS (Street address only- P. O. Box NOT acceptable)	w
President: Gerald Beard Es	- <u></u> - - <u></u> -
Address: 1200 S Knox Avenue	
Donalsonville, GA 31745	
Vice President: Michael Beard	atau isan marka 2007 Banta
HOL Or alike him Avenue	1
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DONO BUNVITE, GIT STITE	≃ معطور د ۲۰ ۲۰ ۳۰
Secretary: Tracie Beard	কাস-কাত্র,
Address: 1200 SKnox Avenue, Donalsonville	
Treasurer: Tracie Beard	. askir s
Address: 1200 S Knox Avenue Donalsonville	
NOTE: If necessary, you may attach an addendum to the application listing additional officers	
and/or directors.	· ···
13. Gerald & Deard	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	: ·- · : :
Gerald J. Deard, C.E.U.	

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 001430456
CONTROL NUMBER : K733119
DATE INC/AUTH/FILED: 09/15/1997

JURISDICTION : GEORGIA
PRINT DATE : 05/22/2000

FORM NUMBER : 211

VISION STREET OUTREACH MINISTRIES, INC. GERALD J. BEARD POB 248 IRON CITY, GA 31759

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

VISION STREET OUTREACH MINISTRIES, INC. A DOMESTIC NONPROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox Secretary of State