F00000005385

TRANSMITTAL LETTER

TO: Qualification/Registration Section Division of Corporations		Н
SUBJECT: US Lausanne (Committee" -	·
SUBJECT: US Lausanne (Name of Corporate de MISSION.	America W-	10000
00789—00U45—00S13-00 Dear Sir or Madam:	-09/11/00 +*****70.1	0103002
The enclosed "Application by Foreign Not for Profit C its Affairs in Florida", "Certificate of Existence", and c referenced not for profit corporation to conducts its aff	check are submitted to register the ab	
Please return all correspondence concerning this matte	er to the following:	
Vicki Andre (Name of Person	PN	
· ·		
MISSION Am (Firm/Company	enca	
Slobb Linco	oln Drive Suite	2/00
Edina, MN S (City, State and Zip G		_
(City, State and Zip C	code)	
For further information concerning this matter, please	call:	0
Name of Person) at (950)	2 912 - 000 / rea Code & Daytime Telephone Number	ASSON OF CO
Qualification/Tax Lien SectionQDivision of CorporationsD409 E. Gaines St.P.	IAILING ADDRESS: ualification/Tax Lien Section ivision of Corporations O. Box 6327 allahassee, FL 32314	ED Y OF STATE ORPERATIONS
Enclosed is a check for the following amount:		
-	78.75 Filing Fee & Sectificate of Certified Copy Certified Copy	f Status &



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 12, 2000

VICKI ANDREN MISSION AMERICA 5666 LINCOLN DRIVE, SUITE 100 EDINA, MN 55436

SUBJECT: US LAUSANNE COMMITTEE

Ref. Number: W00000022322

We have received your document for US LAUSANNE COMMITTEE and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 400A00048186

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. US Lausanne Committee, Inc. (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or
(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. State or country under the law of which it is incorporated) 3. 23-7317473 (FEI number, if applicable)
4. Oct 1973 [Date of Incorporation] [Duration: Year forp. will cease to exist or "perpetual")
6. August 2000 (Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)
7. 5666 Lincoln Drive Suite 100
Edina MN SS436 (Current mailing address)
8. Ministry network association - extension of the e (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:
Naomi Frizzell
8787 Southside Bld., Apt 4707
Jackson ville, Florida, 32250 (City) State Studies Studies, Apt 4 (8) (Office address)
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.
Maoni A. Tuzel (Registered agent/S)gnature)
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to

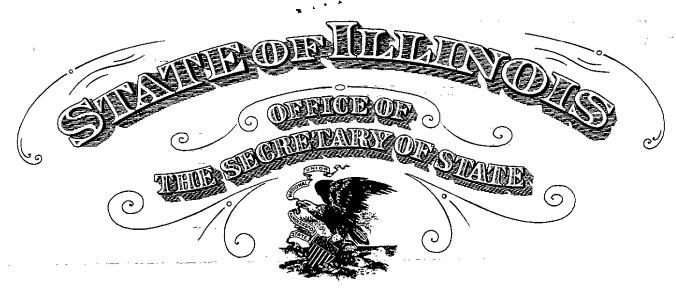
delivery of this application to the Department of State, by the Secretary of State or other

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: Paul A Cedar
التاصفين والاختصار	Address: 69495 Las Camelias
	Cathedral City CA 92234
	Vice Chairman: W/A
	Address:
	Director:
	Address:
	Director: N(A
	Address:
	B. OFFICERS (Street address only- P. O. Box NOT acceptable)
CEO	President: Paul A. Cedar
	Address: 69495 Las Camelias
	Cathedral City, CA 92234
	Vice President: A) /A
	Address:
	Secretary: Dr. Lonnie Allison
	Tooler 100 2012)
	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)
	Paul A. Cedar. Char/CED
	(Typed or printed name and canacity of nerson signing application)

File Number _____5029-090-5



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do



In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this ______ aot ____.

Desse White

SECRETARY OF STATE