

F02 0000004926
TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Providence Self Sufficiency Ministries, Inc.
(Name of Corporation - must include suffix)

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 conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Sister Barbara Ann Zeller, SP

(Name of Person)

Providence Self Sufficiency Ministries, Inc.

(Firm/Company)

8037 Unruh Drive

(Address)

Georgetown, IN 47122

(City/State and Zip Code)

For further information concerning this matter, please call:

Sister Barbara Ann Zeller, SP

(Name of Person)

at (812) 951-1878

(Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration 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 & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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-09/12/02-01051-004
*****70.00 *****70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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F02-4926
AL



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

September 13, 2002

SISTER BARBARA ANN ZELLER
8037 UNRUH DRIVE
GEORGETOWN, IN 47122

SUBJECT: PROVIDENCE SELF SUFFICIENCY MINISTRIES, INC.
Ref. Number: W02000026714

We have received your document for PROVIDENCE SELF SUFFICIENCY MINISTRIES, INC. 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 person designated as registered agent in the document and the person signing as registered agent must be the same.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 602A00052569

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TALLAHASSEE, FLORIDA

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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. Providence Self Sufficiency Ministries, 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. Indiana

(State or country under the law of which it is incorporated)

3. 35-1947580

(FEI number, if applicable)

4. February 21, 1995

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. September 1, 2002

(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)

7. 8037 Unruh Drive, Georgetown, IN 47122

(Principal office address)

8037 Unruh Drive, Georgetown, IN 47122

(Current mailing address)

8. Educational and social services programs/activities

(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: (P.O. Box or Mail Drop Box NOT acceptable)

Name:

Sister Teresa Costello, SP

Office Address:

1320 20th Street East

Bradenton,

(City)

Florida

34208

(Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

Sister Teresa Costello

(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:

A. DIRECTORS

Chairman: Sister Marie McCarthy, SP

Address: Owens Hall
Saint-Mary-of-the-Woods, IN 47876

Vice Chairman: Sister Denise Wilkinson, SP

Address: Owens Hall
Saint-Mary-of-the-Woods, IN 47876

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Sister Barbara Ann Zeller, SP

Address: 8037 Unruh Drive
Georgetown, IN 47122

Vice President: _____

Address: _____

Secretary/Treasurer: Sister Nancy Reynolds, SP

Address: Owens Hall

Treasurer: Saint-Mary-of-the-Woods, IN 47876

Address: _____

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

13. *Sister Barbara Ann Zeller* Sister Teresa Castillo
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Sister Barbara Ann Zeller, SP, President
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greeting:

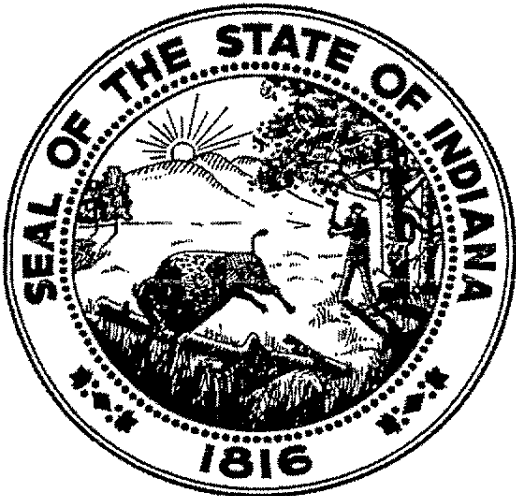
I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

PROVIDENCE SELF SUFFICIENCY MINISTRIES, INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on February 21, 1995, and was in existence or authorized to transact business in the State of Indiana on August 27, 2002.

I further certify this Non-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twenty-Ninth Day of August, 2002.

Sue Anne Gilroy

SUE ANNE GILROY, Secretary of State