

FD300 00000493

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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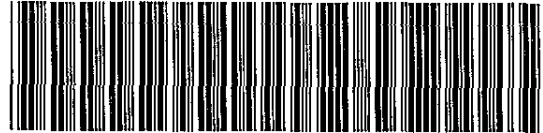
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03 JAN 30 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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03 JAN 30 PM 3:06
DIVISION OF CORPORATION

1-31-03

**CORPORATE
ACCESS,
INC.**

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

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1/30/03 Alinda



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Foreign

1.)

(CORPORATE NAME & DOCUMENT #)

The office of Director for KANA Mission
And His Successors, A Corporation
sole

2.)

(CORPORATE NAME & DOCUMENT #)

3.)

(CORPORATE NAME & DOCUMENT #)

4.)

(CORPORATE NAME & DOCUMENT #)

5.)

(CORPORATE NAME & DOCUMENT #)

FILED
03 JAN 30 PM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SPECIAL INSTRUCTIONS

RECEIVED
03 JAN 30 PM 2:33
DIVISION OF CORPORATION

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

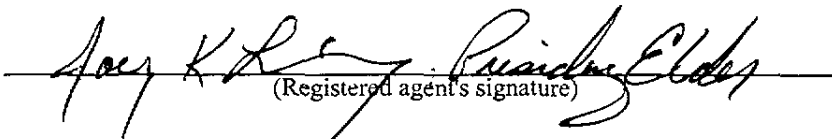
*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. The Office of Director for Kaya Mission and His Successors, a Corporation Sole
(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. Nevada
(State or country under the law of which it is incorporated)
3. _____
(FEI number, if applicable)
4. 1-21-03
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. The day of this filing
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)
7. 126 SW 148th Street, C-100, PMB #13, Burien, WA 98166-1984
(Principal office address)

(Current mailing address)
8. Religious, Educational and Eleemosynary (Charitable)
(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: The Office of Presiding Elder for Sole Resouces Mission and His Successors, a Corporation Sole
Office Address: 1980 N. Atlantic Avenue, Suite 602
Cocoa Beach, Florida 32931
(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.


(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.

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AT
03 JAN 30 PM 2:29
TALLAHASSEE
FLORIDA
SECRETARY OF STATE

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: Calvin B. Jackson, Director

Address: 126 SW 148th Street, C-100, PMB #13, Burien, WA 98166-1984

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: Calvin B. Jackson, Director

Address: 126 SW 148th Street, C-100, PMB #13, Burien, WA 98166-1984

Vice President:

Address:


Secretary:

Address:

Treasurer:

Address:

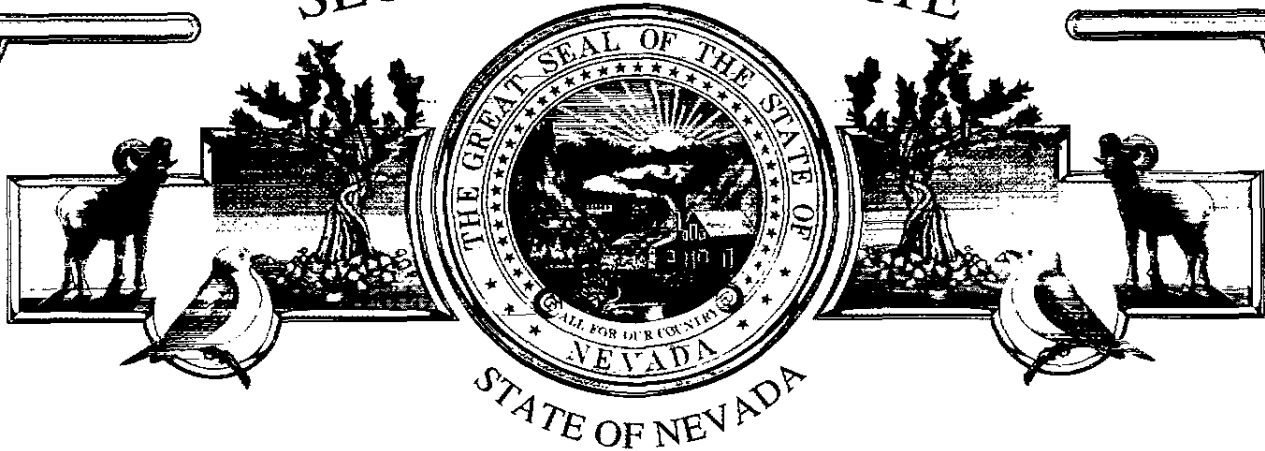
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

14. Calvin B. Jackson, Director
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
AND
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SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **THE OFFICE OF DIRECTOR FOR KAYA MISSION AND HIS SUCCESSORS, A CORPORATION SOLE**, as a corporation sole duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since **January 21, 2003** and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on January 22, 2003.



A handwritten signature in cursive script that reads "Dean Heller".

DEAN HELLER
Secretary of State

By A handwritten signature in cursive script that reads "Damienne C. Smelt".

Certification Clerk