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Special Instructions to	Filing Officer:	
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06/04/03-01031-005 **78.75

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J. BRYAN JUN 1 6 2003

TRANSMITTAL LETTER

Qualification/Registration Section TO: **Division of Corporations**

SUBJECT

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:

Name of Person) (Firm/Company) е (Address) 208 (City, State and Zip Code)

For further information concerning this matter, please call:

Area Code & Daytime Telephone Number

STREET ADDRESS: Qualification/Tax Lien Section **Division of Corporations** 409 E. Gaines St. Tallahassee, FL 32399

Enclosed is a check for the following amount:

MAILING ADDRESS: Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Certificate of Status & Certified Copy



June 5, 2003

ROBERT P. HARTSELL HIS MINISTRIES INC. 4604 9TH AVENUE EAST BRADENTON, FL 34208



SUBJECT: HIS MINISTRIES INCORPORATED Ref. Number: W03000016129

We have received your document for HIS MINISTRIES INCORPORATED and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 245-6043.

Joey Bryan Document Specialist

Letter Number: 403A00035397

13 H 3. 21 RESOLU TION OF BOARD OF DIR H. (Please print or type) 4 do hereby certify ne I, the undersigned (Name) that this Resolution of the Board of Directors of ę pora 200 .P. es 0 0 Der Ð \sim (Corporate Name) Se a corporation duly organized and existing under the laws of the State of NF was duly adopted on 29 Be it resolved, that (Corporate Name) æ ew TSP. organized and State of hereby adopts the name existing in the cncorporated for use in Florida. 3 \cap asto Signature of either Chairman, Chairman or any officer Vice res. Type or print name

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

INHS19(1/00)

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:

ier 1. (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.) erser 6 2. State or country under the law of which it is incorporated) ムれ June (Date of Incorporation) ear corp. will cease to exist Duration: perpetual") tori Date corporation first conducted Affairs in Florida -See sections 617.1501, 617.1502, and 817.155, F.S.) urrent mailing address 8. (Purpose(s) of corporation authorized in home state or country to be carried out in the state of

9. Name and street address of Florida registered agent:



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)

۰ ۲	 Attached is a certificate of existence duly authenticated, not more than 90 day delivery of this application to the Department of State, by the Secretary of State official having custody of corporate records in the jurisdiction under the law o incorporated. 	te or other
u k	 12. Names and addresses of officers and/or directors: (Street address only-P NOT acceptable) A. DIRECTORS (Street address only-P. O. Box NOT acceptable) 	P. O. Box
	Chairman:	· · _ · _ ·
	Address:	
	Vice Chairman:	ALC: MILLE
	Address:	The second
		it was
	Director:	CT C
	Address:	of F
		- ···
	Director:	• • • • • •
	Address:	_
	B. OFFICERS (Street address only P. O. Box NOT acceptable), President: Reverend Rolen	
	Address: 4604 9th Ave, East	
	Bradenton, FL 34208	
	Vice President: Reverend Paulette T. Hartsell	
	Address: 4604 9th Ave, East	•
	Bradenton FL. 34208	• *****
	R P I I T I I I	
	Address: 4604 9th Aver E Bradentton FL	34208
	Treasurer: Paulette T. Hartsell	
	Address: 4604 9th Ave East Bradenta	~ FL 3420
	NOTE: If necessary, you may attach an addendum to the application listing additional additionadditional additionadditional additionaddita additional addit	
	and/or directors.	
	13	n)
	(Typed or printed name and capacity of person signing application)	_

STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

HIS MINISTRIES, INC.

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Non Profit Corporation was registered by this office on June 14, 1993.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Joan Hartsell 26 Clayton Ave Williamstown, NJ 08094



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 21st day of April, 2003

John E McCormac, CPA State Treasurer