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J. BRYAN SEP 3 0 2003

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations SUBJECT: The Rivers of Waters - MOC, Inc (Name of Corporation - must include suffix) Dear Sir or Madam:
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:
Arnetta M. Williams (Name of Person)
_
The Ministers Outreach Crusade Inc
A
$\frac{POBOX823}{\text{(Address)}}$
Henderson NC 27536 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Arne Ho Williams at (919) 383-0328 est. 3118 (Name of Person) (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 Pivision of Corporations P. O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & \Bigcup \\$78.75 Filing Fee & \Bigcup \\$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 17, 2003

ARNETTA M. WILLIAMS THE MINISTERS OUTREACH CRUSADE, INC. PO BOX 823 HENDERSON, NC 27536

SUBJECT: RIVERS OF WATERS, MOC, INCORPORATED

Ref. Number: W03000020341

We have received your document for RIVERS OF WATERS, MOC, INCORPORATED 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.

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: 603A00042013

ANSTER SERVICE MASS.

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:
Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like imports 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. North Carolina 3. 56-1792033 (FEI number, if applicable) (FEI number, if applicable)
(State or country under the law of which it is incorporated) 4. (Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. (Date corporation first conducted Affairs in Floridg - See sections 617.1501, 617.1502, and 817.155, F.S.)
7. 925 Lehman Street; Henderson, NC 27536 (Principal office address)
PO Box 823. Henderson, NC 27536 (Current mailing address)
8. (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) + each or 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: Margaret Franklin, Pastor
Office Address: 164 Acan Ave
Orlando Florida 328// (City) Florida (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.
Marquet Landin, Paster (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 Vice Chairman: Address: Magase **B. OFFICERS** 27536 Williams Treasurer: M in . NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Vice Chairman, or any officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)



State of North Carolina Department of The Secretary of State

CERTIFICATE OF EXISTENCE (NONPROFIT)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

THE MINISTER'S OUTREACH CRUSADE

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 4th day of November, 1992, with its period of duration being perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





IN WITNESS WHEREOF, I have hercunto set my hand and affixed my official seal at the City of Raleigh, this 26th day of June, 2003.

6 laine I. Marshall Secretary of State

Certification Number: 6955135-1 Page: 1 of 1 Verify this certificate online at www.secretary.state.nc.us/Verification.