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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: The Miracles Community Network

(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:

Paul Ferrini

(Name of Person)

The Miracles Community Network

(Firm/Company)

11435 Walden Loop

(Address)

Parrish, Florida 34219

(City/State and Zip Code)

For further information concerning this matter, please call:

Paul Ferrini

(Name of Person)

at (941) 776-8001

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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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TALLAHASSEE, FLORIDA

**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 Miracles Community Network Incorporated**

(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. **New Mexico**

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

3. **85-0404009**

(FEI number, if applicable)

4. **August 11, 1992**

(Date of Incorporation)

5. **Perpetual**

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

6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. **11435 Walden Loop Parrish, FL 34219**

(Principal office address)

11435 Walden Loop Parrish, FL 34219

(Current mailing address)

8. **Educational 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 **NOT** acceptable)

Name: **Paul Ferrini**

Office Address: **11435 Walden Loop**

Parrish, _____, Florida **34219**

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

A. DIRECTORS

Chairman: Paul Ferrini

Address: 11435 Walden Loop, Parrish, FL 34219

Vice Chairman: Celia Slater

Address: 1090 McCarty St. Dunedin, FL 34698

Director: Ted Neff

Address: 925 Alder St. Edmonds, WA 98020

Director: _____

Address: _____

B. OFFICERS

President: Paul Ferrini

Address: 11435 Walden Loop, Parrish, FL 34219

Vice President: _____

Address: _____

Secretary: Ted Neff

Address: 925 Alder St. Edmonds, WA 98020

Treasurer: Celia Slater

Address: 1090 McCarty St. Dunedin, FL 34698

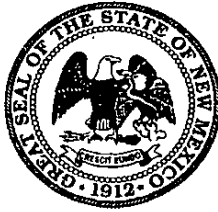
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Paul Ferrini President/Chairman
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Paul Ferrini, President and Chairman

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

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TALLAHASSEE, FLORIDA



OFFICE OF THE
PUBLIC REGULATION COMMISSION

CERTIFICATE OF GOOD STANDING AND COMPLIANCE

IT IS HEREBY CERTIFIED that:

THE MIRACLES COMMUNITY NETWORK

1576990

a corporation organized under the laws of
NEW MEXICO

is duly authorized to transact business in New Mexico, as a
Domestic nonprofit corporation, under the

NONPROFIT CORPORATION ACT



(53-8-1 to 53-8-99 NMSA 1978)

having filed its Articles of Incorporation AUGUST 11, 1978
and Certificate of Incorporation issued as of said date

IT IS FURTHER CERTIFIED that the fees due the Public
Regulation Commission, which have been assessed against the
aforesaid corporation, have been paid to date and aforesaid
corporation is in corporate good standing & duly authorized
to transact business as its corporate existence has not been
revoked in New Mexico. This Certificate is not to be
construed as an endorsement, recommendation, or notice of
approval of the corporations financial condition or business
activities and practices. This Certificate of Good Standing
and Compliance expires MAY 15, 2007

DATED: DECEMBER 26, 2006

In testimony whereof, the Public Regulation of the
State of New Mexico has caused this certificate to be
signed by its Chairman and the seal of said
Commission to affixed at the City of Santa Fe.


Chairman

Bureau Chief

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TALLAHASSEE, FLORIDA
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