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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

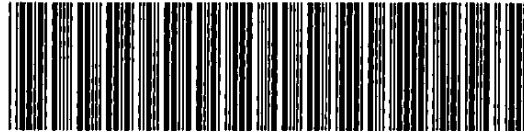
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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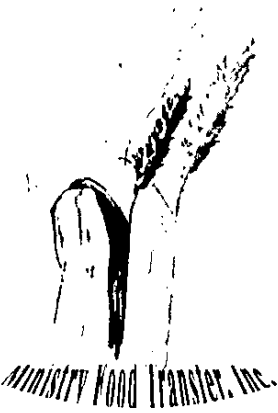
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/17/07



July 12, 2007

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P. O. Box 6327,
Tallahassee, FL 32314.

Dear Sir / Madam:

This letter is to request permission to do business in Florida as a not for profit corporation.

I have enclosed the following documents to support our new filing.

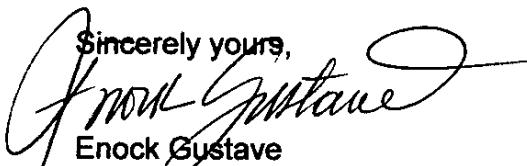
1. Original certificate of existence from the State of New York,
2. Cover Letter,
3. Application by Foreign not for profit corporation for authorization to conduct its affairs in Florida,
4. A money order to \$87.50 as filing fee for the following
 - a) Certificate of Status
 - b) Certified Copy Certificate of Status
 - c) & Certified Copy

As a registered Agent and President /CEO of Ministry Food Transfer, Inc, and resident of Orlando, Florida, I want to request that that all correspondences regarding Ministry Food Transfer, Inc. to be mailed the Registered Agent Office in Florida upon the approval of the authorization to conducts affairs in Florida to:

Enock Gustave, President & CEO
Ministry Food Transfer, Inc.
600 West Oakridge Road, Suite B
Orlando, Florida 32809.

If you need additional information, Please call our office in New York at:
917-613-9912 or 646-842-1078

Sincerely yours,



Enock Gustave
President & CEO

Ministry Food Transfer, Inc.
2322-28 7th Avenue, New York, NY 10030
Phone: 917-613-9912 646-842-1078
e-mail: ministryfoodtransfer@gmail.com

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Ministry Food Transfer, 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:

Enock Gustave

(Name of Person)

Ministry Food Transfer, Inc.

(Firm/Company)

600 West Oak ridge Road

Suite B

(Address)

Orlando, Florida 32809

(City/State and Zip Code)

For further information concerning this matter, please call:

Enock Gustave

(Name of Person)

at (917) 613-9912

(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

**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. Ministry Food Transfer, 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. New York 3. 22-3934339
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/31/2006 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A (not yet)
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 600 West Oak Ridge Road, Suite B, Orlando, FL 32809
(Principal office address)

Same as Above (after Registration)
(Current mailing address)

8. Disaster relief agency: fighting hunger, poverty & malnutrition among poor people.
(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: Enock Gustave

Office Address: 600 West Oak Ridge Road, Suite B
Orlando, Florida 32809
(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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Daniel Desir

Address: 87-05 166 Street # 6G

Jamaica Estates, NY 11432

Vice Chairman: Edwina Williams

Address: 317 Beulah Street

Orangeburg, SC 29115

Director: Cherryetta Fay

Address: 468 Riverside Drive

New York, NY 10027

Director: Joan Kenol

Address: 4427 Emerson Street

Jacksonville, FL 32207

B. OFFICERS

President: Enock Gustave

Address: 600 West Oak Ridge Road, Suite B

Orlando, Florida 32809

Vice President: Rev. Steve Kelly

Address: 7601 East Treasure Drive

North Bay Village, FL 33141

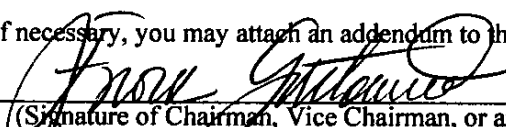
Secretary: Carline Jeanty

Address: 2413 N. Pine Hills Road, Orlando, FL 32808

Treasurer: Rev. Carlos Mendes

Address: 225 NE 48th Street, Miami, FL 33137

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

13.  July 12, 07
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Enock Gustave, President & CEO

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

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of MINISTRY FOOD TRANSFER, INC. was filed on 05/31/2006, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 24th day of May two
thousand and seven.*



Special Deputy Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MINISTRY FOOD TRANSFER, INC
ATTN: ENOCK GUSTAVE
2322-28 7TH AVENUE, UNIT 1C
NEW YORK NY 10030

CUST REF: NONE

Enclosed is the information you requested. Your payment of \$25.00 is hereby acknowledged.

If the name on the enclosed document(s) does not match exactly with the name of the entity you requested, this office does not have a record of the exact name you requested. The document(s) provided appear(s) to be of sufficient similarity to be the entity requested.