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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

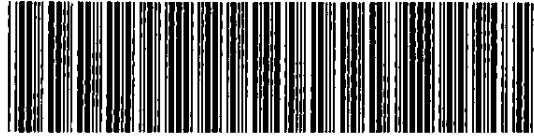
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF FLORIDA
TALLAHASSEE

T. G. Bush MAR 15 2010

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: The Emin Way
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", or "Certificate of Good Standing" 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:

Ron Carlson
Name of Person

The Emin Way Inc.
Firm/Company

1985 Ward Road
Address

Decatur / TN 37322
City/State and Zip Code

office @ theeminway.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Marcus at (561) 451-3233
Name of Person 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. The Emin Way 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. Tennessee 3. 27-1193670
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. October 30, 2009 5. perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. has not yet conducted business in FL
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 1985 Ward Rd, Decatur, TN 37322
(Principal office address)

same

(Current mailing address)

8. spiritual education
(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: Lisa Marcus

Office Address: 19456 Preserve Dr
Boca Raton, Florida 33498
(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.

Lisa Marcus
(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:

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President:

Address:

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. Ron D Carlson
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Ron D Carlson, Secretary
(Typed or printed name and capacity of person signing application)

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CLERK OF SUPERIOR COURT
STATE OF ALABAMA
BIRMINGHAM



STATE OF TENNESSEE
Tre Hargett, Secretary of State
Division of Business Services
312 Rosa L. Parks Avenue
6th Floor, William R. Snodgrass Tower
Nashville, TN 37243

February 9, 2010

THE EMIN WAY, INC
ATTN: RON CARLSON
1985 W WARD RD
Decatur, TN 37322 USA

Request Type: Certificate of Existence/Authorization
Request #: 0007731

Issuance Date: 02/09/2010
Copies Requested: 3

Document Receipt

Receipt #: 55065
Payment-Account - N. A. TEMPLAT E - TENN. INC., Decatur, TN
Filing Fee: \$60.00
\$60.00

Regarding: The Emin Way, Inc.
Filing Type: Corporation Non-Profit - Domestic
Charter/Qualification Date: 10/30/2009
Status: Active
Duration Term: Perpetual
Control #: 617575
Date Formed: 10/30/2009
Formation Locale: Meigs County
Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that

The Emin Way, Inc.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State which affect the existence/authorization of the business;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination.

Tre Hargett, Secretary of State
Business Services Division