(Req	uestor's Name)	
(Add	Iress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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SECRETARY OF STATE





COVER LETTER

TO: , New Filing S Division of G			
SUBJECT:		ilian Assembly of Go	d, Inc.
	Name of Corpora	tion – must include suffix	
Dear Sir or Madam:			
"Certificate of Exister		Standing" and check are subn	tion to Conduct its Affairs in Florida" nitted to register the above referenced
Please return all corre	spondence concerning this m	natter to the following:	
		Walter R Silva	
		Name of Person	
	Georgia Br	azilian Assembly of God	Inc
	Ocorgia Di	Firm/Company	, mo.
		•	
			
		1991 Davis Lane	
		Address	
	٨	Marietta, GA 30067	
		ity/State and Zip Code	
	waltersilv	a@msn.com	
E-1		future annual report notificat	ion)
For further information	n concerning this matter, ple	aga anlli	
roi iuithei illioilliado.	ii concerning this matter, pie	ase can:	
\/\alte	er R Silva at	<u>(770)</u> 321	-0025
	of Person	Area Code & Daytime Tel	
MAILING A	DDRESS:	STREET/CO	URIER ADDRESS:
New Filing Se	ection	New Filing Se	ection
Division of Co P.O. Box 6327		Division of Co Clifton Buildi	•
Tallahassee, F			e Center Circle
Enclosed is a check fo	r 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. (Name of corpor import in langua in the name at n	Georgia Brazilia ration: must include the word "INCORPOI tige as will clearly indicate that it is a corpor resent. "Company" or "Co." may not be us	n Assen RATED" or oration instead ed as a corporation	nbly of Go "CORPORAT ad of a natural porate suffix by	od, Inc. ION" or words or abbreerson or partnership is a nonprofit corporation	eviations of li f not so conta n.)	ike ined	
(State or cour	ntry under the law of which it is incorporat	3 red)	(FEI n	umber, if applicable)			
	09/19/2001 Pate of Incorporation)					_	
(E	Pate of Incorporation)	(Dur	ation: Year co	rp. will cease to exist o	r "perpetual"))	
6	ucted affairs in Florida if prior to registration	N/A					
(Date first cond	ucted affairs in Florida if prior to registration	. See section:	s 617.1501 & 6	17.1502, F.S, to determ	ine penalty lia	bility.)	
7.	3500 NW Boca Raton Blvd,	Suite 71	6, Boca Ra	ton, FL 33431			
	(Princ	ipal office a	ddress)			-	
	1991 Davis Lan	e. Mariett	a. GA 3006	3 7			
	(Cun	rent mailing	address)				
9. Name and stre	The purpose of the corp corporation authorized in home state or cor- eet address of Florida registered agent: Valdemir O Barreto	(P.O. Box			SECRETARY TALLAHASSE	Md LI NOF BL	三
Office Address:	914 New Lake Drive				UF STAT	င့်ခဲ့	E
	Boyton Beach	, Flo	orida	33426 (Zip Code)	Smi	26	
	(City)			(Zip Code)			
Having been na designated in th further agree to	agent's acceptance: med as registered agent and to accept is application, I hereby accept the app comply with the provisions of all stat ar with and accept the obligations of t	pointment d utes relativ	is registered of the proper as registered of the proper as registered	agent and agree to a er and complete perf	ct in this cap	pacity.	I

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 10 JUN 17 PM 3: 28

Chairman:	
Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	· · · · · · · · · · · · · · · · · · ·
Address:	
D. OFFICERS	
B. OFFICERS President: Walter R Silva	
Address: 461 Powers Ferry Road	
Marietta, GA 30067	
Vice President: Jose Eduardo Silva	
Address: 899 Powers Ferry Road	
Marietta, GA 30067	
Secretary: Douglas P Rosa	
Address: 1523 Roswell Road, Marietta, Ga 30062	
Treasurer: Genivaldo Almeida	
Address: 1425 Ridenour Blvd, Kennesaw, GA 30152	
NOTE: If necessary, you may attach an addendum to the applic	eation listing additional officers and/or directors.
13. (Signature of Chairman Vice Chairman, or any office	er listed in number 12 of the application)
14 Walter R S	ilva
(Typed or printed name and capacity of	person signing application)

Control No. 0142435

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

SECRETATIVE OF STATE SECRETARIANSSEE FLORID

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

GEORGIA BRAZILIAN ASSEMBLY OF GOD, INC.

Domestic Non-Profit Corporation

was formed or was authorized to transact business on 09/19/2001 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 17th day of March, 2010

B: P. W-

Brian P. Kemp Secretary of State

Certification Number: 5390824-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp