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SECRETARY OF STATE.

AUG 12 2010 D. A. WHITE

#### **COVER LETTER**

10:	New Filing S Division of C			
SUB.	JECT:	THE TREE	OF LIFE MINISTRY	INC.
5020			tion – must include suffix	····
Dear S	Sir or Madam:			
"Certi	ficate of Existen		Standing" and check are subn	tion to Conduct its Affairs in Florida' nitted to register the above referenced
Please	e return all corres	spondence concerning this n	natter to the following:	
			KEVIN NOVAK	<u> </u>
			Name of Person	
		TREE	OF LIFE MINISTRY INC	),
		<del>- , , , , , , , , , , , , , , , , , , ,</del>	Firm/Company	
			245 E MAIN ST B	<del></del> _
		·		<u></u>
			Address	
			ORWALK, OH 44857	
			City/State and Zip Code	<del> </del>
	F		OFLIFEMINISTRY.ORG	
			•	non)
For fu	rther information	n concerning this matter, ple	ease call:	
	1251 //4		000 070	1407
•		of Person at	Area Code & Daytime Te	9-1107 lephone Number
	MAILING AI New Filing Se		STREET/CO New Filing Se	URIER ADDRESS:
	Division of Co P.O. Box 6327	orporations	Division of Co	•
	Tallahassee, F		Clifton Buildi 2661 Executiv Tallahassee, F	ve Center Circle
Enclos	sed is a check for	r the following amount:		
<b>√</b> \$7	0.00 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

REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT 17 THE STATE OF FLORIDA: TREE OF LIFE MINISTRY OHIO INC.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like /: 55 import in language as will clearly indicate that it is a corporation instead of a natural person or partnership from so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.) (SSEE STATE) OHIO 3. (FEI number, if applicable) (State or country under the law of which it is incorporated) **PERPETUAL** 04/20/2010 (Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual") N/A (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determine penalty liability.) 245 E MAIN ST. B. NORWALK, OHIO 44857 (Principal office address) 245 E MAIN ST B NORWALK, OHIO 44857 (Current mailing address) CHURCH (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: EDWIN PALMER Office Address: 550 BIG TREE RD SOUTH DAYTONA 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.

12. Names and addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: Address: Director: Address: Director: **B. OFFICERS** President: KEVIN NOVAK Address: 203 E MAIN ST NORWALK, OH 44857 Vice President: LOUIS MELOTT Address: 4709 KENMORE DR PARMA, OH 44134 Secretary: SUZANNE MOORE Address: 245 E MAIN ST APT B NORWALK OH 44857 Treasurer: SUZANNE MOORE Address: 245 E MAIN ST APT B NORWALK OH 44857 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Kecin Nounk President

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

# United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show THE TREE OF LIFE MINISTRY INC., an Ohio not for profit corporation, Charter No. 1931441, having its principal location in Norawlk, County of Huron, was incorporated on April 20, 2010 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 12th day of July, A.D. 2010

**Ohio Secretary of State** 

Validation Number: V2010193J576D0

#### RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned _	Kein P Normk, do hereby certify (Name)
that this Resolution	of the Board of Directors of Tree of Wife Ministry P.
	(Corporate Name)
a corporation duly or	ganized and existing under the laws of the State of
	ppr./ 20 ,2010.
	For of Life Ministry Inc (Corporate Name)
	g in the State of OHTO, hereby adopts the name
Tree of L	if Minisory Offic Inc for use in Florida.
Dated: 8-3-	-10
	Signature of either Chairman, Vice Chairman or any officer
	Kevin 17. Novak  Type or print name
INHS19(1/00)	Make checks payable to Florida Department of State and malido:  Division of Corporations P.O. Box 6327 Tallahassee, FL 32314