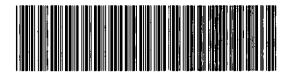
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(Re	questor's Name)	
(Ad	dress)	,
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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RECEIVED

11 JUN -3 AM 10: 27

SECRETARY OF STATE FLORIDA DEPARTMENT OF STATEALLAHASSEE, FLORIDA Division of Corporations

May 18, 2011

BRENDA K AMMON P.O. BOX 32054 PALM BEACH GARDENS, FL 33420

SUBJECT: BRINGING BACK OUR COMMUNITY NONPROFIT

Ref. Number: W11000027449

We have received your document for BRINGING BACK OUR COMMUNITY NONPROFIT and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 411A00012345

COVER LETTER

TO:	Division of Corporations					
SURI	UBJECT: Bringing Back Our Community Nonprofit Inc. Name of Corporation – must include suffix					
SOL						
Dear S	Sir or Madam:					
"Certi	ficate of Existence		tanding" and check are subm	tion to Conduct its Affairs in Florida", nitted to register the above referenced		
Please	return all correspo	ondence concerning this m	atter to the following:			
		Brenda K. Ammon				
			Name of Person			
			Firm/Company	·		
		1208 Marine Way				
			AD2			
			Address			
			Palm Beach, FL 33408			
		C	ty/State and Zip Code			
		ultimateheal	th4u@aol.com			
	E-ma		future annual report notificat	ion)		
For fu	rther information o	oncerning this matter, plea	se call:			
	Brenda K Name of		(561) 307 Area Code & Daytime Tel	-4978 lephone 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				
Enclos	sed is a check for the	ne following amount:				
<u> </u> : \$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 TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1.	Bringing Back Our Con	nmunity No	onprofit Inc.		
(Name of corpoint in languation the name at p	ration: must include the word "INCORPORATED age as will clearly indicate that it is a corporation is resent. "Company" or "Co." may not be used as a	" or "CORPOR nstead of a natu corporate suffix	ATION" or words or abl ral person or partnership by a nonprofit corporati	oreviations of like if not so contained ion.)	
2.	Minnesota 3		45-2388944		
4	2/17/2011 5	715	perpetual		
6.	5/15/20 ucted affairs in Florida if prior to registration. See sec	11	& \$17 1502 E S to deter	mine penalty lighility	
7	20724 County Road 77, Rea	ids Landing, ice address)	MN 55968		
	•	•			
	P.O. Box 32054, Palm Bead	ch Gardens,	FL 33420		
	(Curent ma	ining actuiress)			
8. Charitable and educational purposes more specifically to promote community revitalization (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)					
9. Name and str	eet address of Florida registered agent: (P.O.)	Box <u>NOT</u> acce	eptable)	11 JUN -3	
Name:	Brenda K Ammon	_		De St. 1 maren	
Office Address:	1208 Marine Way, AD2 North Palm Beach (City)	-		Section Park	
	North Dalm Booch	E1 *1	22400		
	(City)	, Florida	(Zip Code)		
			,	P	
Having been na designated in th further agree to	agent's acceptance: med as registered agent and to accept servic is application, I hereby accept the appointm comply with the provisions of all statutes re ar with and accept the obligations of my pos	ent as register lative to the pr	ed agent and agree to coper and complete per	act in this capacity. I	
	Sanla KAmmo	Market a construction of the construction of t			

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: Brenda K Ammon	
Address: P.O. Box 32054	
Palm Basch Cardons El 33420	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
	22 -
B. OFFICERS	55 Co
President: Brenda K Ammon	
Address: P.O. Box 32054	ti.
Palm Beach Gardens, FL 33420	
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. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Brenda K Ammon, President

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

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; that this corporation is authorized to do business as a corporation at the time this certificate is issued; and that amendments to the articles of that corporation were filed on the dates listed below.

Name: Bringing Back Our Community Nonprofit

Date Formed: 02/17/2011

Chapter Governed By: 317A

Amendments Filed On:

There are no amendments for this file.

This certificate has been issued on 04/28/11.

TALLARASSEE FLORIDA



Mark Ritchie Secretary of State.