F11000004161

(Req	uestor's Name)		
(Add	lress)		
(Add	lress)		
(City	/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	iness Entity Nar	ne)	
(Document Number)			
Certified Copies	Certificates	s of Status	
. Special Instructions to F	iling Officer:		

Office Use Only



800211088598

09/06/11--01024--002 **70.0



W11-46177



RECEIVED 19 OCT 14 PM 12: 39

SECRETARY OF STATE TALLAHASSEE, FLORIDA

tember 7, 2011

TRICIA A. HONECK D. BOX 70 ASON, OH 45040

JBJECT: BACK2BACK MINISTRIES, INC.

ef. Number: W11000046177

We have received your document for BACK2BACK MINISTRIES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a 2nd page to the application that is necessary.

Please complete the addresses for the attached list of Officers and/or Directors.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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: 011A00020746

COVER LETTER

	Division of Corporations
	SUBJECT: BOUL BACK MINISTORS 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", or "Cerificate 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:
E	RATICIA A. HONECK Name of Person
	Backa Back Ministries Inc.
	P.O. BOX 70
	BUB Corporate Way Ste 103
	Mason DH 4504D City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
	For further information concerning this matter, please call: (5/3)403 - 054/
	Name of Person at (513) 754-D300 #1712 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 \$\sum_{\text{Certificate of Status}}\$878.75 Filing Fee & \sum_{\text{Certified Copy}}\$878.75 Filing Fee & \sum_{\text{Certified Copy}}\$878.75 Filing Fee & \sum_{\text{Certified Copy}}\$878.75 Filing Fee, Certified Copy

ION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO STATE AFFAIRS IN FLORIDA
ANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCTETS AREFAIRS IN E OF FLORIDA:
CORPORATION" or words or abbreviations of like
language as will clearly indicate that it is a corporation instead of a natural person or partnership if not sociotained me at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
e or country under the law of which it is incorporated) 3. 31 - 146 - 55 (FEI number, If applicable)
May 1996 5. Afrod Will cease to exist or "perpetual") (Duration: Year corp. will cease to exist or "perpetual")
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
e first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
BUB Corporal Way 54 103 Mason, DH 45010
P.O. Box 70 Mason OH 45040
orkational physical
I children's homes and in impoverished communities, this is accomplished
P.O. BOX 7D Mason OH 45010 OK ZBOK provides for the Spirmule motional educational physical of social needs of importational emotionally through as ovice the Children's homes and in importational internationally through as ovice (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) for the state of Florida of the
Value and sites address of 1 forms registered agent. (1.0. dox mor acceptable)
Name CAROLINE BURNS
Office Address 40 YAWL DRIVE
Name CAROLINE BURNS Office Address 40 YAWL DRIVE COCOA BEACH, Florida 32931 (City) (Zip Code)
0. Registered agent's acceptance: laving been named as registered agent and to accept service of process for the above stated corporation at the place
esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties nd I am familiar with and accept the obligations of my position as registered agent.
A CONTRACT OF THE CONTRACT OF

 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.

(Registered agent's signature)

nd addresses of officers and/or directors:	重点 主
rors	
NIA	
	निंदु है
	,
irman: WA	100
:	
or Told further berger Executive Hirector	
Q114 0-000001 1201 Al 103	
ess: Phy Colors to the way we the	
Part Diff Agordina Nacional	
ector: Roland Foreman, US operations thrector	
idress: B118 Corporate way, 54 103	
Mason DH 4501D	
B. OFFICERS	
President: PFF -175905	
Address: 406 Fouth All	
Mason OH 45D4D	
1 7 L 1 L 1 L 1 L 1 L 1 L 1 L 1 L 1 L 1	
Vice President:	
Address: Wone - remaining board members	·····
are Trustells - see attached list.	····
Secretary:	
Address:	
Treasurer: SCOH MIRLIAN	
Address: 8118 Corporate Way Mason, OH 450)4D
Address. Ciff() (1) Jordan Osci (1) 100	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/o	r directors.
13. See Executive Hireotor	<u></u>
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	ion)
14. GFCCHIVE HIVECTO (Typed or printed name and capacity of person signing application)	waraanaanaanaanaanaanaanaanaanaanaanaanaa

	_			***************************************		
;	Street	City	57	Zip	Phone	Title
enberger, Todd	8442 Wick Lane	Mainville	ОН	45039	(513) 403-0541	Executive Director
man, Roland	6604 Neville Court	Mason	ОН	45040	(513) 515-7909	US Operations Director
per, Richard M.	58303 CR 105	ELKHART	IN	46517	(574) 370-1026	Mexico Disector
ınafo, Jason	5561 Erwin Simpson Rd	Mason	OH	45040	NA	Nigeria Director
						The state of the s

Board of Trustees

Name Street City ST Zip Phone	Title 978 78 Trustee
	78 Trustee 策
Amburgy, Jody 2634 O'Neal Rd Waynesville OH 45068 (513) 535-89	77
Housh, Ez 130 Hickory Lane Loveland OH 45036 (513) 282-61	30 Trustee
Weller, Shawn 8602 Calumet Way Cincinnati OH 45249 (513) 469-63.	28 Trustee
Greer, Jeff 7955 Butler Warren Rd West Chester OH 45069 (513) 459-948	88 President
Greer, Debbie 7955 Butler Warren Rd West Chester OH 45069 (513) 459-94	88 Trustee
Kersey, Jay 823 Whitetail Way Lebanon OH 45036 (513) 932-74	64 Trustee
Linder, Martha 9450 White Gate Ln Cincinnati OH 45243 (513) 831-22:	13 Trustee
McQuinn, Scott 1578 Marietta Dr Lebanon OH 45036 NA	Treasurer

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

I, Jon Husted, 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 BACK 2 BACK MINISTRIES, INC., an Ohio not for profit corporation, Charter No. 941720, having its principal location in Mason, County of Warren, was incorporated on May 06, 1996 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 30th day of June, A.D. 2011

Ohio Secretary of State

Validation Number: V2011181JDB255