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(Requestor's Name)					
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	☐ WAIT	MAIL			
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(Document Number)					
Certified Copies	_ Certificates	of Status			
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SECRETARY OF STATIONS
DIVISION OF CORPORATIONS
12 FEB 29 PH 1: 28

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COVER LETTER

TO:	New Filing S Division of C			
SUBJ	ECT:	FATHER'S LOVE D	ELIVERANCE MINIS	STRY, INC.
000			ion – must include suffix	
Dear S	Sir or Madam:			
"Certi	ficate of Existen		Standing" and check are subm	tion to Conduct its Affairs in Florida", nitted to register the above referenced
Please	return all corre	spondence concerning this m	atter to the following:	
		ADMEN	SA JACKSON-SPENCE	R
			Name of Person	
		Firm/Company		
		94	2 RED DANDY DR	,
		<u> </u>	· Address	
			RLANDO, FL 32818 ity/State and Zip Code	
			valuebusinesses.com	
	E-1		future annual report notificati	ion)
For fu	ther information	n concerning this matter, plea	ase call:	
		ST JEAN at of Person	(407) 556 Area Code & Daytime Tel	-5431 ephone Number
	MAILING AN New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction orporations	New Filing Se Division of Co Clifton Buildir	rporations ng e Center Circle
Enclos	ed is a check for	r the following amount:		
□ \$70	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:

(Name of corpo	PATHER'S LOVI	E DELIVERAN CORPORATED" or "	CORPORATION	STRY, INC. ON" or words or abbrevia	tions of like
import in langu in the name at p	pration: must include the word "ING lage as will clearly indicate that it is present. "Company" or "Co." may r	s a corporation instead not be used as a corpo	l of a natural prate suffix by a	erson or partnership if not nonprofit corporation.)	so contained
	GEORGIA Intry under the law of which it is in	3.		20-8511397	
•	•	•	•	= =	
	MARCH 23, 2007 Date of Incorporation)	5	F	PERPETUAL	
	F ducted affairs in Florida if prior to reg	EVRUARY 24, 2	012		
(Date first cond	lucted affairs in Florida if prior to reg	gistration. See sections	617.1501 & 61	7.1502, F.S, to determine p	enalty liability.)
	942 RED DA	NDY DR ORLAI	NDO, FL 32	2818	
		(Principal office add	dress)		
	942 BED DA	NDY DR ORLAN	NDO. FL 32	818	
		(Current mailing a	ddress)		
					72 XISS
ESTA	ABLISH AND OVERSEE P	LACES OF WOR	RSHIP, CO	NDUCT EVANGELI	SMISI
(Purpose(s) of	ABLISH AND OVERSEE P corporation authorized in home sta	ite or country to be car	rried out in the	state of Florida)	2 %
Name and str	reet address of Florida registered	i agent: (P.O. Box N	IOT acceptab	ole)	12 FEB 29 PH 1: 28
		-	•	•	
Name:	GREAT VALUE ACCOU	NTING & TAXES	S, INC		: 28
CC an Addussa	: 2840 PYTHAGORAS CIF	⊋			<i>-</i>
ince Address:	2040 I TITIAGOTIAGOTI				
	OCOEE	Flor	ida	34761	
	(City)	, Flor		(Zip Code)	
). Registerec	d agent's acceptance: amed as registered agent and to	accent service of n	racess for the	ahove stated corporati	ion at the place
signated in th	his application. I hereby accept	the appointment as	registered at	gent and agree to act in	this capacity. I
rther agree to	o comply with the provisions of iar with and accept the obligation	all statutes relative	to the propei	· and complete perform agent.	ance of my dutie
u i um jumun	ar wan una accept the oongan	ons of my position i			
	men A :				
	70				
	t /i	Registered agent's si	ignature)		

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:_ Address: Director:___ Address: **B. OFFICERS** President: ADMENSA JACKSON-SPENCER Address: 942 RED DANDY DR ORLANDO, FL 32818 Vice President: JANE MERLIN WALTERS Address: 1830 RIVER SHOALS DR CONYERS, GA 30012 Secretary: PATRICIA PEARSON

Address: 3783 BIRCH MOUNTAIN ROAD PORT ORANGE, FL 32129 Treasurer: JENNIFER SPICER-DAVIS Address: 942 RED DANDY DR ORLANDO, FL 32818 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) ADMENSA JACKSON-SPENCER

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Drive Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

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

FATHER'S LOVE DELIVERANCE MINISTRY, INC.

Domestic Non-Profit Corporation

was formed or was authorized to transact business on 03/23/2007 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 20th day of January, 2012

B: P.h-

Brian P. Kemp Secretary of State 13 ECD CONTORATIONS

SECRETARY OF STATE DIVISION OF CORPORATIONS

Certification Number: 7948765-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp