# F12000003318

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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12 MAY 29 PH 4: 13

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## **COVER LETTER**

TO:	New Filing Son Division of C					
SUBJ	ECT:		Christian Church	<del>,</del>		
		Name of Corporat	ion – must include suffix			
Dear S	Sir or Madam:					
"Certi	ficate of Existend		it Corporation for Authoriza standing" and check are subn lorida.			
Please	return all corres	pondence concerning this m	atter to the following:			
			Bonnie Thomas			
			Name of Person			
		Shi	loh Christian Church_			
			Firm/Company			
		<del></del>	<del> </del>			
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			P.O. Box 2692 Address	·		Son
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		Peac	chtree City, GA 30269		\$	1
			ity/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	29	dijiz
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			@yahoo.com			5 <del>151</del> ()
	E-n	nail address: (to be used for	future annual report notificat	ion)	32) 	3
For fu	rther information	concerning this matter, plea	ase call:		SKOLL	LLI I
	<del></del>	Thomas at of Person	( 706 ) 957 Area Code & Daytime Tel	75898 ephone Number		
	MAILING AI New Filing Sec		STREET/CO New Filing Se	URIER ADDRESS:		
		ision of Corporations  Division of Corporations				
	P.O. Box 6327		Clifton Building			
	Tallahassee, FI	. 32314	2661 Executiv Tallahassee, F	e Center Circle L 32301		
Enclos	ed is a check for	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 of Certified Copy	&	



FILEU SECRETARY OF STATE NOTED IN CENTRE OF STATE

12 MAY 29 PM 4: 13

FLORIDA DEPARTMENT OF STATE Division of Corporations

May 3, 2012

BONNIE J. THOMAS POST OFFICE BOX 2692 PEACHTREE CITY, GA 30269

SUBJECT: SHILOH CHRISTIAN CHURCH CORPORATION

Ref. Number: W12000024290

We have received your document for SHILOH CHRISTIAN CHURCH CORPORATION, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	•	\$35.00
Registered Agent		
Designation		\$35.00
Certified Copy		\$8.75
Certificate of Status		\$8.75

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The document must contain both the street address of the principal office and the mailing address of the entity.

The registered agent must sign accepting the designation.

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

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

12 MY 29 PH 3:5

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 112A00013275

#### 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 corpo import in langua in the name at p	ration: must include the word age as will clearly indicate the resent. "Company" or "Co."	Sillon Chris I "INCORPORATEI at it is a corporation may not be used as a	IIAN UNUTED  " or "CORPORA instead of a nature corporate suffix	Corporation ATION" or words or abbre al person or partnership if by a nonprofit corporation.	viations of like not so contain	e ed
			_			
	California ntry under the law of which i	<del>-</del>				-
4.	08/30/1988 Date of Incorporation)	5.		Perpetual		
1)	Date of Incorporation)		(Duration: Year	corp. will cease to exist or	"perpetual")	_
6	ucted affairs in Florida if prior	06/06/2	012			
(Date first cond	ucted affairs in Florida if prior	to registration. See se	ctions 617.1501 d	& 617.1502, F.S. to determin	ie penalty liabi	Īitγ.)
7	45 Tyle	rwoods Dr., Sha	rosbura. GA	30277		
··		(Principal of	ice address)			_
	B O Bo	v 2602 Bascht	ron City, GA	30360		
<del></del> -	F.O. BC	(Current ma	iling address)	30269		_
9. Name and str	corporation authorized in hor				12 HAY 29	SECRETARIO BYTESTOSS BYTESTOSS
Name:	Bonnie Thomas		_		PH	SYTE OF THE
Office Address:	540 Lago Loop		_		H 4: 13	Y OF STATE
	Davenport		Florida	33837	ယ	급류
	(City	у)	, 1 toriuu	(Zip Code)		S
Having been na designated in th further agree to and I am famili	l agent's acceptance: amed as registered agent a sis application, I hereby acceptly with the provision ar with and accept the obtained.	ccept the appointm ns of all statutes re ligations of my pos	ent as registere lative to the pro ition as registe	d agent and agree to acoper and complete perfo	t in this capa	icity. I
1 (/		(Registered ag	ent'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.

FILEU SECRETARY OF STATE DYISION OF CURPORATIONS

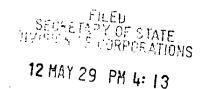
12. Names and addresses of officers and/or directors:

A. DIRECTORS	12 HAY 29	PH 4: 13
Chairman: Bonnie Thomas		
Address: 45 Tylerwoods Dr, Sharpsburg, GA 30277		
Vice Chairman:		
Address:		
Director:		
Address:		
Director:		
Address:		
B. OFFICERS		
President: Bonnie Thomas		
Address: 45 Tylerwoods Dr. Sharpsburg, GA 30277		
Vice President:		
Address:		
Secretary: Yeuncheng Tai		
Address: 105 Shoal Creek Drive, Sharpsburg, GA 30277		
Treasurer: Ining King		
Address: 205 Oconee Woods Trail, Sharpsburg, GA 30277		
NOTE: If necessary, you may attach an addendum to the application listing additional of	ficers and/or dir	ectors.
13. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	the application)	<del></del>
14. President Bonnie Thomas		
(Typed or printed name and capacity of person signing application	(ווט	

### State of California

#### Secretary of State

CERTIFICATE OF STATUS



ENTITY NAME:

SHILOH CHRISTIAN CHURCH

FILE NUMBER:

C1556821

FORMATION DATE:

08/30/1988

TYPE:

DOMESTIC NONPROFIT CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 17, 2012.

DEBRA BOWEN
Secretary of State