

F14000000 4 860

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

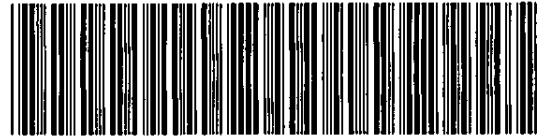
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FEB 17 2015
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT:

Total Restoration Ministries
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 "Certificate of Status" 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:

Suzy Hanan Peter
Name of Person

Firm/Company

7524 Semat st #307
Address

Orlando, FL, 32819
City/State and Zip Code

restorationministry.peter67@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzy Peter
Name of Person

at (434) 906-4563
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

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

already
paid

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

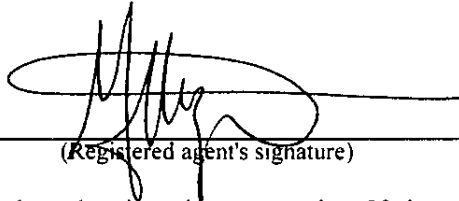
IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:

1. Total Restoration Ministries (Incorporated)
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Virginia 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. December 28/11 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. January 01/2015
(Date first conducted affairs in Florida, if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 7524 Seurat St apt 307, Orlando, FL 32819
(Principal office address)
7524 Seurat St. apt 307, Orlando, FL, 32819
(Current mailing address)
8. Ministering to broken hearted People, giving hope to family in the Community
(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: Suzy Hanan Peter
Office Address: 7524 Seurat St #307
Orlando, Florida 32819
(City) (Zip Code)

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DIVISION OF CORPORATIONS
STATE OF FLORIDA

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: Suzy Hanan Peter
Address: 7524 Seurat St apt 307
Orlando, FL 32819

Vice Chairman: Luka Maluk
Address: 7524 Seurat St apt 307
Orlando, FL, 32819

Director: Suzy Hanan Peter
Address: 7524 Seurat St apt 307
Orlando, FL, 32819

Director: _____
Address: _____

B. OFFICERS

President: Suzy Hanan Peter
Address: 7524 Seurat St apt 307
Orlando, FL, 32819

Vice President: Luka Maluk
Address: 7524 Seurat St apt 307
Orlando, FL, 32819

Secretary: _____
Address: _____

Treasurer: _____
Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature] Director
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Suzy Hanan Peter Director
(Typed or printed name and capacity of person signing application)

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That Total Restoration Ministries is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is December 28, 2011;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:
October 2, 2014*

Joel H. Peck

Joel H. Peck, Clerk of the Commission