

F15000004291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

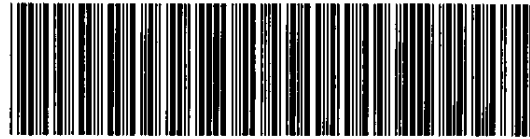
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 SEP 25 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SEP 29 2015
Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Genesis Life Center, 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 "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:

Chantay Banks
Name of Person

Firm/Company

2204 Deata Ct.
Address

St. Cloud, FL 34772
City/State and Zip Code

chantaybanks@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chantay Banks at (314) 249-5805
Name of Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration 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

**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. Genesis Life Center Inc.
(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.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Missouri 3. 37-1754781
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Aug 3, 2015 5. Perpetual
(Date of Incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. N/A
(Principal office address)

2204 Deata Ct, St. Cloud, FL 34772
(Current mailing address, if different)

8. The organization will be formed to temporarily assist families or individuals in need of services such as living, food, social services, spiritual, daycare services and life skills
(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: Chantay Banks
Office Address: 2204 Deata Ct
St. Cloud, Florida 34772
(City) (Zip Code)

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.

Chantay Banks
(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.

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CLERK OF STATE
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Chantay Banks

Address: 2204 Deata Ct

ST. Cloud, FL 34772

Vice Chairman: Ursula King

Address: 11003 Westport St.

MARYLAND Heights, MO 63045

Director: Thompson, Alfred

Address: 2001 NW. 69th St., Apt A

KANSAS City, MO 64151

Director: _____

Address: _____

B. OFFICERS

President: Chantay Banks

Address: 2204 Deata Ct

ST. Cloud, FL 34772

Vice President: Ursula King

Address: 11003 Westport St.

MARYLAND Heights, MO 63045

Secretary: Vivonne Page

Address: 4017 ASKew Ave, Kansas City, MO 64130

Treasurer: _____

Address: _____

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

13. Chantay Banks

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Chantay Banks

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

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15 SEP 25 AM 8:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

STATE OF MISSOURI



Jason Kander
Secretary of State

CERTIFICATE OF AMENDMENT

WHEREAS,

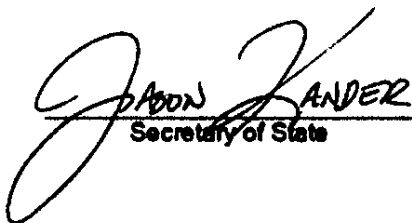
Genesis Life Center, Inc.
N01388900

Formerly,

Genesis Life Center

a corporation organized under The Missouri Nonprofit Corporation Law has delivered to me Articles of Amendment of its Articles of Incorporation and has in all respects complied with the requirements of law governing the Amendment of Articles of Incorporation under The Missouri Nonprofit Corporation Law, and that the Articles of Incorporation of said corporation are amended in accordance therewith.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 3rd day of August, 2015.


Secretary of State

