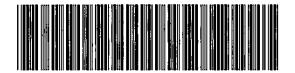
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Special Instructions to Filing Officer:				

Office Use Only



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SECRETARY OF STATE

HOV 0 3 WILL D. BRUCE

COVER LETTER

TO: New Filing Section

Division of Corporations

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m SURIFCT}$. BLESSED FOUNDATION CORPORATION

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:

GENE CIPRIANO

Name of Person

BLESSED FOUNDATION CORPORATION

Firm/Company

200 E DEL MONTE AVE

Address

CLEWISTON FLORIDA 33440

City/State and Zip Code

gene.cipriano@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gene Cipriano

_{at (}863

902.0662

Name of Person

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

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 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.)

ARIZON		_{3.} 27-2640370	
	ntry under the law of which it is incorporated		
5/18/201		5. PERPETUAL	
,	Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpet	ual")
NONE			
Date first cond	lucted affairs in Florida if prior to registration. S	see sections 617.1501 & 617.1502, F.S, to determine penal	lty liabilit
500 N. F	RANCISCO ST. APT.201 (CLEWISTON 33440	
		office address)	
500 N 5	DANGIOGO OT ARTOGA	OLEVACOTON 00 440	
500 N. F	RANCISCO ST. APT.201		
	(Curre	nt mailing address)	
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		As ~	
(Purpose(s) of	corporation authorized in home state or count		
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(Purpose(s) of	corporation authorized in home state or count	P.O. Box NOT acceptable) AHASS AHASS	
(Purpose(s) of Name and str	corporation authorized in home state or count eet address of Florida registered agent: (P.O. Box NOT acceptable) ARETARY SEE CO.	T
(Purpose(s) of Name and str	corporation authorized in home state or count	P.O. Box NOT acceptable) AHASSEE FL	
(Purpose(s) of Name and <u>str</u> Name:	corporation authorized in home state or count eet address of Florida registered agent: () GENE CIPRIANO	P.O. Box NOT acceptable) AHASSEE, FLORI	TETO
(Purpose(s) of Name and str Name:	corporation authorized in home state or count eet address of Florida registered agent: () GENE CIPRIANO 200 E DEL MONTE AVE	P.O. Box NOT acceptable) P.O. Box NOT acceptable) P.O. Box NOT acceptable)	FILED
(Purpose(s) of Name and str Name:	corporation authorized in home state or count eet address of Florida registered agent: () GENE CIPRIANO 200 E DEL MONTE AVE	P.O. Box NOT acceptable) P.O. Box NOT acceptable) P.O. Box NOT acceptable)	FILED
(Purpose(s) of Name and str Name:	corporation authorized in home state or count eet address of Florida registered agent: () GENE CIPRIANO 200 E DEL MONTE AVE	P.O. Box NOT acceptable) AHASSEE, FLORID	FILED
(Purpose(s) of Name and str	corporation authorized in home state or count eet address of Florida registered agent: (SENE CIPRIANO 200 E DEL MONTE AVE CLEWISTON	P.O. Box NOT acceptable) AHASSEE, FLORIDA Florida 33440	TED
(Purpose(s) of Name and str Name: Tice Address:	corporation authorized in home state or count reet address of Florida registered agent: (I GENE CIPRIANO 200 E DEL MONTE AVE CLEWISTON (City)	P.O. Box NOT acceptable) AHASSEE, FLORIDA Florida 33440	D

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: DANIEL HOWARD GLIDDEN		
Address: 500 N. FRANCISCO ST. APT.201 CLEWISTON 33440		
Vice Chairman: GENE CIPRIANO		
Address: 200 E DEL MONTE AVE CLEWISTON 33440		
Director:		
Address:		
Director:		
Address:		
B. OFFICERS		
President: DANIEL HOWARD GLIDDEN	SF1	
Address: 500 N. FRANCISCO ST. APT.201 CLEWISTON 33440		<u> </u>
Size of the second seco	ع الحج	
Vice President: GENE CIPRIANO	A) <u> </u>
Address: 200 E DEL MONTE AVE CLEWISTON 33440	22	
Secretary: DANIEL HOWARD GLIDDEN		
Address: 500 N. FRANCISCO ST. APT.201 CLEWISTON 33440		
Treasurer: DANIEL HOWARD GLIDDEN		
Address: 500 N. FRANCISCO ST. APT.201 CLEWISTON 33440		
NOTE: IC.	17 11 .	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	d/or directors.	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applied	cation)	_
14. GENE CIPRIANO VICE PRESIDENT (Typed or printed name and capacity of person signing application)		_





Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greetings:

I, Ernest G. Johnson, Executive Director of the Arizona Corporation Commission, do hereby certify that by Succession KDQA Foundation Amended name to:

BLESSED FOUNDATION CORPORATION

a corporate sole organized under the laws of the State of Arizona, did Amend name on August 26 $^{\rm th}$,2015

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said Corporation is not administratively dissolved for failure to comply with The provisions of the Arizona Nonprofit Corporation Act; and that its most recent Annual Report, Subject to the provisions of A.R.S. Sections 10-3122, 10-3123, 10-3125, & 10-11622, has been delivered to the Arizona Corporation Commission for filing; and that the said corporation has not Filed Articles of Dissolution as of the date of this certificate.

This certificate relates only to the legal existence of the above Named entity as of the date of issue. This certificate is not to be Construed as an endorsement, recommendation, or notice of approval of the Entity's condition or business activities and practices.

DITAT DEUS 03

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 26 day of August, 2015, A.D.

Executive Director

By: