F16000000410

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certificates of Status								
Spec al Instructions to Filing Officer:								





300279959573

12/21/15--01001--018 **70.00

2016 JAN 25 PH 1: 24

JAN 2 8 2016 J. HARRIS

COVER LETTER

TO:	Registration Sec Division of Cor	rporations				
SHRI	IECT: Blessings In	ternational				
эо во	LC1	Name of Corporati	on – must inc	clude suffix		
Dear S	Sir or Madam:					
Affair	s in Florida", "Cer	on by Foreign Not for Profitificate of Existence", or "Conced not for profit corporat	Certificate of	Status" and ch	eck are submitted to	
Please	return all correspondent	ondence concerning this ma	atter to the fo	ollowing:		
	Barry Ew	у				
		Name o	of Person			
	Blessings	International				
	 	Firm/C	Company			
	1650 N I	ndianwood Ave				
						
Address						
		City/State a	ınd Zip Code			
	bcwy@bl	essing.org				
	E-m	ail address: (to be used for	future annua	l report notifica	ntion)	
For fu	rther information	concerning this matter, plea	se call:			
Jimmy Maynard 918 at (918	250-8101	ephone Number	
	Name o	Person	Area Code	Dayume Tel	ephone Number	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327				STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building		
Tallahassee, FL 32314				2661 Executive Center Circle Tallahassee, FL 32301		
Enclos	sed is a check for t	he following amount:				
= \$7	0.00 Filing Fee	□\$78.75 Filing Fee & Certificate of Status		Filing Fee & ed Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 7, 2016

BARRY EWY 1650 N INDIANWOOD AVE BROKEN ARROS, OK 74012

SUBJECT: MEDICINE FOR MISSIONS

Ref. Number: W15000081607

SLOTE ARY OF STAIL. IALLAHASSEE FILE

We have received your document for MEDICINE FOR MISSIONS and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

You must include the title of each officer/director.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 415A00026670

2016 JAN 25 PH 1: 24



December 21, 2015

BARRY EWY 1650 N INDIANWOOD AVE BROKEN ARROS, OK 74012

SUBJECT: MEDICINE FOR MISSIONS

Ref. Number: W15000081607

We have received your document for MEDICINE FOR MISSIONS and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

You must include the title of each officer/director.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 415A00026670

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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	ernational, Inc. ration: must include the word "INCORPORATED" or "CORPORATION" or words or abbuage as will clearly indicate that it is a corporation instead of a natural person or partnership is	reviations	of like	- - ed
in the name at p	resent. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporatio	n.)	01114111	
	issions, INC.			_
(If name unav	ilable in Florida, enter alternate corporate name adopted for the purpose of transacting busi	ness in Fl	orida)	
2. Oklahoma	3. 73-1130590			
(State or cou	ntry under the law of which it is incorporated) (FEI number, if applicable)			=
4. 07/06/1981	5. perpetual			_
(1	Date of Incorporation) (Date of duration, if other than p	erpetual)		_
6	ucted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determ			.
(Date first cond	ucted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determ	nine penai	ity liabi	ility.)
7. 1650 N Indian	wood Ave Broken Arrow, OK 74012			
	(Principal office address)			-
	(Current mailing address, if different)			-
	citations and non controlled pharmaceutical sales for export	\$3	F-2	
(Purpose(s) of	corporation authorized in home state or country to be carried out in the state of Florida)	=:	5	
). Name and str		Sana Silen Silen Silen Silen	± } Mentalitere	
	eet address of Florida registered agent: (P.O. Box NOT acceptable)	ξης. Op.	S	
Name:	URS Agents, LLC	Print Print		maker er
Office Address:	1540 Glenway Drive	.πa (γ.	\mathbb{R}	8
omee madeess.	Tallahassee	MOREO HWE		Mark States
	Tallahassee , Florida 32301 (Zip Code)	Ç;n ≱	F	
10. Registered	agent's acceptance:		-4 46 .	
aesignatea in th	med as registered agent and to accept service of process for the above stated corp is application, I hereby accept the appointment as registered agent and agree to	act in thi	is cana	acitv. I
further agree to	comply with the provisions of all statutes relative to the proper and complete per familiar with and accept the obligations of my position as registered agent.	rformano	e of n	ny
	URS Agents, LLC			
	-			
	By Army Purdy, Assistant Secretary (Registered agent's signature)			
	() (Registered agent's signature)			
the Departn	a certificate of existence duly authenticated, not more than 90 days prior to deliver tent of State, by the Secretary of State or other official having custody of corporate under the law of which it is incorporated.	y of this records	applic in the	ation to

12. Names and addresses of officers and/or directors

A. DIRECTORS please see attached Chairman:_ Addre: s:____ Vice Chairman:_____ Addre: s:_____ Director: Addre: s:_____ Director:___ Addre: s: **B. OFFICERS** President:____Barry Ewy, 1650 N Indianwood Ave Broken Arrow, OK 74012 Vice President: Addre: s:___ Secretary: Addre: s:_____ Treasurer: Address: 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) (Typed or printed name and capacity of person signing application)

BLESSINGS INTERNATIONAL BOARD OF TRUSTEES

Fiscal Year 2016

Paul Stanton, MD, Board Chair

Employer: Adult Gastroenterology Assoc. 10715 East 99th Street Tulsa, OK 74133 918-481-4700 (w) 918-461-2264 (h) 918-693-8901 (c)

Bobby Watson Jr., PharmD, Board Vice-Chair

705 East Union Street Broken Arrow, OK 74011 918-906-3994 (c)

Mike Smith, EA, Board Treasurer

Employer: Smith Tax & Accounting, Inc. 505 North Aspen Avenue Broken Arrow, OK 74012 918-258-0009 (w)

Karen Carmichael, Esq., Board Secretary

Employer: Karen Carmichael & Associates 2727 E. 21st Street Tulsa, Oklahoma 74114 918-493-4939

Barry Ewy, PharmD, JD, MHA President/CEO and Board Member

Employer: Blessings International 1409 E Fargo Street Broken Arrow, OK 74012

Broken Arrow, OK 74 918-250-8101 (w) 918-924-1736 (c)

Doreen Babo, DPH, MBA, Board Member

Employer: Heal our World 3621 Winding Creek Road Sacramento, CA 95864 504-723-9139 (c) 916-265-3275 (f)

Paul McClendon, PhD, Board Member

3757 East 78th Street Tulsa, OK 74136 918-493-1726 (h)

Donald Tredway, MD, PhD, Board Member

6301 South 225th East Avenue Broken Arrow, OK 74014 918-760-9581 (c) 918-355-7390 (f)

Blessings International is a 501(c)(3) organization incorporated under the laws of the State of Oklahoma.

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200 JAN 25 PM 1:23

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC NOT FOR PROFIT CORPORATION

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>BLESSINGS INTERNATIONAL</u> whose registered agent is <u>BARRY EWY</u>, with its registered office at <u>1650 N INDIANWOOD AVE</u>, <u>BROKEN ARROW 74012 USA</u> Oklahoma is a <u>Domestic Not For Profit Corporation</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>4th</u>, day of <u>December</u>, <u>2015</u>.

Secretary Of State