Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H16000022976 3)))



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To:

11111

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number: 120120000007 Phone

: (702)866-2500

Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

FOREIGN PROFIT/NONPROFIT CORPORATIONS

Lord Heal Our Land, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

JAN 29 2016

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1/27/2016

COVER LETTER

11111

FO: Registration Section Division of Corporations			
SUBJECT: Lord Heal Our Land, Inc.			
Name of C	orporation — must in	iclude suffix	
Doar Sir or Madam:			
the enclosed "Application by Foreign Not the Affairs in Florida", "Cortificate of Existence of Existence of the above referenced not for profit to	e", or "Certificate o	f Status" and ch	eck are submitted to
Please return all correspondence concerning	this matter to the f	ollowing:	
	Erin Regan		
	Name of Person		····
InC	Corp Services, Inc		
	Firm/Company		,,
236	O Corporate Circi	9	
	Suite 400		
	Address		
	iderson, NV 8907		
City	State and Zip Cod	e	
docu	iments@incorp.co	חמי	
B-mall address: (to be u	sed for future annu	l report notifica	tion)
or further information concerning this mat	ter, please call:		
Erin Regan on behalf of InCorp Services, I	no. 702	866-2500	ephone Number
Name of Person	Area Code	Daytime Lei	epuone Mamber
MAILING ADDRESS; Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	·	Registration S Division of Co Clifton Buildi	orporations ng ve Center Circle
Inclosed is a check for the following amou	nt:		
\$70,00 Filing Fee S78,75 Filing Fe Certificate of		Filing Fee & led Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

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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 AUTIIORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

		porate name adopted for the purpose of trans	sucting business in Pl	lorida)
Nevada		3		
	ntry under the law of which it is inco	nporated) (PEL number, IF i	applicable)	
09/30/2009		5. Perpetual		
(0	Date of Incorporation)	(Date of duration, if	other than perpetual)	'
Upon Filing				
Jule Diret cond	ucted afthlis ja Plaridu II priar to regis	iralion. Saa sections 617.1301 & 617.1502, F	.5, to determine penu	lý llubilů)
555 US Higi	nway 395 N, Carson City, NV	89704		
		(Principal office address)		
	©			
······································	(Curre	nt mailing address, if different)		
	\	,	2016	
Von Profit C	haritable Organization serving	g families with financial education	圣帝 宝	-17
urnoss(s) of	purporation authorized in home state	or country to be curried out in the state of F	larida), >	gumatan
			\$\frac{\pi}{2}\$	‡
lame and str	set address of Florida registered a	agent: (P.O. Box <u>NOT</u> acceptable)	<u></u> 9 >	
	InCom Rendese Inc		A II:	O
Namo:	InCorp Services, Inc.			
ice Address:	17888 87th Court North		DE LOS	
	Loxahatchee	, Florida <u>33470</u>	·	
	(City)	19/	p Code)	

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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12. Names and addresses of officers and/or directors

A. DIRECTORS		
Chuirman:		
Address:		
Vice Chairman:		
Address:		
Director:		
Address:		
Phlenature		
Director:		
Address:	And the second s	1 (
B. OFFICERS	28 28 28	Π
President:		$\stackrel{\cdot \cdot}{\Rightarrow}$
Address:	○~ ~~ ~~	
Vice President:		
Address:		
Secretary: Elizabeth Sturgeon		
Address: 555 US Highway 395 N, Carson City, NV 89704		
Treustirer:		<u></u>
Address:		
NOTE: If necessary, you may attach an addendum to the application lists	ng additional officers and/or directors.	
13. Signature of Chairman, Vice Chairman, or any officer listed in	n number 12 of the spulication)	
14. Elizabeth Surgeon, Secretary	- manuar in an any officeration,	
(Typed or printed name and capacity of person s	gning application)	

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CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, LORD HEAL OUR LAND, INC., as a non-profit corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since September 30, 2009, and is in good standing in this state.

office on January 18, 2016.

Barbara K. Cegarste

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160118-0375
You may verify this electronic certificate
online at http://www.nvsos.gov/

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