## F76000001117

(Requestor's Name)
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PICK-UP WAIT MAIL
(During False Name )
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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## COVER LETTER

W16-15124 F16-1117

	COVERLETTER WILL 15.								
TO:	Registration Section Division of Corporations  COVERLETTER  W16  F16  F16  F16								
SUBJECT: Michael Ministries, Inc.  Name of Corporation - must include suffix									
Dear Sir or Madam:									
Affairs	losed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to the above referenced not for profit corporation to conduct its affairs in Florida.								
Please return all correspondence concerning this matter to the following:									
	Jennifer Schwirzer Name of Person								
	Michael Ministries								
•	Firm/Company								
	1103 Cromwell Rd Address								
,	Wyndmoor PA 19038  City/State and Zip Code								
	E-mail address: (to be used for future annual report notification)								
For furt	ner information concerning this matter, please call:								
<del></del>	Jennifer Schwirzer at (267) 664-6144  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								
Enclose	d 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

REGISTER A FOR THE STATE OF I	REIGN NOT FOR FLORIDA: Chael Min	eprofit cori	corporated	R AUTH		ONDUCT ITS AFFAIRS IN
					ATION" or words or a ural person or partnersl by a nonprofit corpor	
				_	ourpose of transacting to the second section of the second section of the second second second second section of the second seco	•
4. (State or count)	ty under the law of th	which it is incorpo	5	(Pate	of duration, if other th	an nemetual)
						etermine penalty liability.)
	Cromwell F					ر ماري
			mailing address,			F 5 T
8. Religiou	is and chai	·			n the state of Florida)	8 - 0 T
9. Name and stree		•				ID: 36
Name: Office Address: _	Michael	Schwirz	er			— — — — — — — — — — — — — — — — — — —
Office Address: _	5832	Conner T	rail			<del></del>
<del></del>	Orlando	(City)	, Flor	da	32808 (Zip Code)	<del></del>
10. Registered a Having been nam designated in this further agree to co duties, and I am f	ed as registered a	e: Jaent and to acc	ent comics of m	raceve f	or the above stated	corporation at the place to act in this capacity. I performance of my
		And So	7	anotura)		
11. Attached is a the Departmen	certificate of exist	tence duly authe	nticated, not me	ore than		ivery of this application to rate records in the

jurisdiction under the law of which it is incorporated.

A'ddendum Additional Members of Board of Trustees

Patty LaVanture PO Bx 489 Pullman, MI 49450

Linda Carney 110 Dugout Bend Buda, TX 78610



I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that the certificate of incorporation of

## MICHAEL MINISTRIES

a domestic NONSTOCK corporation, was filed in this office on March 4, 1996. The organization and first report has not been filed as of the date shown below. A certificate of dissolution has not been filed, and so far as indicated by the records of this office such corporation is in existence.

Secretary of the State

Date Issued: February 18, 2016