# F/6000004228

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Constitution to	Filing 0#:	•
Special Instructions to	Filing Officer:	
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Office Use Only



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09/19/16--01037--002 \*\*70.00

2016 SEP 19 FM 2: 25

K. SALY SEP 2 2 2016

# **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT:_	JOSEPH	t's COAT i	YIUI STR	4 100	
		Name of Corporat	ion – must in	clude suffix	
Dear Sir or Mac	lam:				
Affairs in Florid	la", "Certifica	Foreign Not for Prote of Existence", or "not for profit corpora	Certificate of	Status" and che	eck are submitted to
Please return all	corresponder	ace concerning this n	atter to the fo	llowing:	
		Louis T.	CELLI		
		Name	of Person		
	•	JOSEPH'S (	GAT H	INI CLUT	(HCORPORATED
		Firm/	Company	•	
		AUR BLUB	way c	(1266	
		P.o. Bo	x 263		
		A	ddress	·	
		Prazish City/State	FL	34219	
		City/State	and Zip Code		
	L.	TCELLI 6	المصل مر	رادال ، ده	, a1
-	E-mail ad	dress: (to be used for	future annua	l report notifica	ition)
For further info	rmation conce	rning this matter, ple	ease call:		
louis	T. C.	ELL at	( <u>901</u> )	461-	1020
	Name of Pers	son	Area Code	Daytime Tel	ephone Number
	ING ADDRES ation Section	SS:		Registration S	
	n of Corporati ox 6327	ons		Division of Co Clifton Buildi	
	ssee, FL 3231	4			ve Center Circle
Enclosed is a cl	heck for the fo	llowing amount:			
<b>⋨</b> \$70.00 Filin		78.75 Filing Fee &	<b>(1878 75</b> )	Filing Fee &	☐ \$87.50 Filing Fee,
φ/υνο rim		Certificate of Status		ed Copy	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. JOSEPH'S COAT MINISTRY 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.	•
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida.  2. TENNESSEE 3. 33-1123500  (State or country under the law of which it is incorporated)  4.	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	(,
4. 5(27/2005 5	5
(Date of Incorporation) (Date of duration, if other than perpetual)	
6 * 9/i/2016 E &	
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)	
7. HOIS BANBURY CITCLE PARTICISH PC 34219	
(Principal office address)	
P.O. Box 263 PARZEISH EL 34219	
(Current mailing address, if different)	
8. EVANGELZE FEED TEACH OPPHANS IN ZAH BIR FOOTBEAU TO APPLACHE (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	14
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	us
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	,
Name: LOUIS T. CELLI	
Office Address: GOLR BURY CIRCLE	
Name: LOUIS T. CELLI  Office Address: Gorg BANBURY CIRCLE  PARRISH Florida 34219  (City) (Zip Code)	
(Eity) (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.	
Louis T. Celle	
(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.	

# 12. Names and addresses of officers and/or directors

# A. DIRECTORS

Chairman: LOUIS 1. CELLI	
Address: 4018 BANBURY CIRCLE PARRISH FL 34219	
Vice Chairman: RONALD B. WOLLWEST	
Address: 806 PLEASANT SITE RD SECHER TN 38375	
Director: Scott G. LEEKA  Address: 4260 TARPON AVE BOOLTA SPRINGS FL	·-····································
Director: Scott G. LEEKA  Address: 4260 TARPON AVE BONITA SPRINGS FL	10 10
Director: CYNTIA CETLL	,
Address: 4018 BANDURY CIRCLE PARRISH FL 34219	
B. OFFICERS	
President: Louis T. Cezui	<del></del>
Address: 4018 BANBURY CIRCLE PARRICH FL 34219	
Vice President:	
Address:	<u>.                                    </u>
Secretary: CYNTIA (ELLI	
Address: 4018 BANBURY CHECLE PARRICISH FL 34219	
Treasurer: RONALD B. WOLLWERT	
Address: 806 PLEASANT SITE Rd SELMER TN 38375	
NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors.	
13	_
_	
14. Cours T. CELLI - PRESIDENT CHAIRMAN  (Typed or printed name and capacity of person signing application)	





# STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

**LOUIS T. CELLI** 

PO BOX 263

PARRISH, FL 34219-0263

September 8, 2016

Request Type: Certificate of Existence/Authorization

Request #:

0213607

Issuance Date: 09/08/2016

Copies Requested:

**Document Receipt** 

Receipt #: 002879722

Filing Fee:

\$20.00

Payment-Check/MO - JOSEPH'S COAT MINISTRY INC, PARRISH, FL

\$20.00

Regarding:

JOSEPH'S COAT MINISTRY INC

Filing Type:

Nonprofit Corporation - Domestic

Formation/Qualification Date: 05/27/2005

Status:

Active

**Duration Term:** 

Perpetual

Business County: MCNAIRY COUNTY

Control #:

494879

Date Formed:

05/27/2005

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

### JOSEPH'S COAT MINISTRY INC

- \* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- \* is delinquent in the payment of one or more of the fees, taxes or penalties owed to the State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of this business;
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Verification #: 018926731 Processed By: Nichole Hambrick