

FW000004293

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

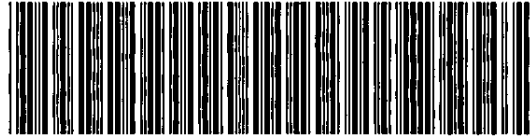
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

cert. W1660239

Office Use Only



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08/29/16--01024--020 **70.00

2016 SEP 26 A 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren
SEP 27 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 31, 2016

RABBI KUPPEL LINDOW
2516 S. TWYCKENHAM DR
SOUTH BEND, IN 46614 US

SUBJECT: MIDWEST TORAH CENTER CORPORATION
Ref. Number: W16000060239

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

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 716A00018526

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Midwest Torah Center Corporation

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:

Rabbi Kuppel Lindow

Name of Person

Midwest Torah Center

Firm/Company

2516 S. Twyckenham Dr.

Address

South Bend, IN 46614

City/State and Zip Code

rabbilindow@midwesttorah.org

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

For further information concerning this matter, please call:

Kuppel Lindow

Name of Person

at (574)

Area Code

360-5027

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

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee,
Certified 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. Midwest Torah Center Corporation
(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)

2. Indiana 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 26th, 2007 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 2516 S. Twyckenham Dr. South Bend, IN 46614
(Principal office address)

(Current mailing address, if different)

8. To operate a Passover program in a Florida hotel.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)


9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Bruce Len
Name: _____

6833 Barbarossa St.
Office Address: _____
Boca Raton, Florida 33433
(City) (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.



Bruce Len
(Registered agent's signature)

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TALLAHASSEE, FLORIDA

10. 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.

11. Names and addresses of officers and/or directors

A. DIRECTORS

See Attached

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Mark Orenstein

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Mark Orenstein, Chairman/President

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

Midwest Torah Center Corporation
Board of Directors
Members and Officers

Mark Orenstein
President
1345 E Victoria
South Bend, IN 46614

Cynthia Ebersol
Vice-President
1824 Forest Edge Dr
Mishawka, IN 46544

Janine Orenstein
Treasurer
1345 E Victoria
South Bend, IN 46614

James Goodkin
Secretary
50900 BRIARWOOD CT
Granger, IN 46530

Moshe Katz
Member
2502 S Twyckenham Dr.
South Bend, IN 46614

Steven Yelderman
Member
1123 E Victoria
South Bend, IN 46614

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TALLAHASSEE, FLORIDA

**State of Indiana
Office of the Secretary of State**

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

MIDWEST TORAH CENTER CORPORATION

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on February 01, 2006, and was in existence or authorized to transact business in the State of Indiana on September 20, 2016.

I further certify this Domestic Nonprofit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, September 20, 2016

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

2006020200064 / 2016109016

Verify this certificate: <https://bsd.sos.in.gov/ValidateCertificate>