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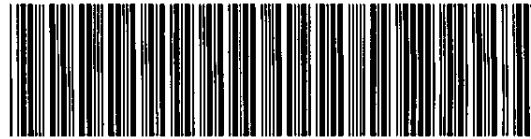
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. YOUNG

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2016 NOV -7 PM 4:41

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Villages Mind and Body Institute 508c1A
Name of Corporation – must include suffix

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:

Tonya Houghton
Name of Person

Villages Mind and Body Institute
Firm/Company

324 S. US Hwy 441
Address

Lady Lake / FL / 32159
City/State and Zip Code

info@vmbi.org
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL 32301
10 NOV - 7 PM 1:15

For further information concerning this matter, please call:

Tonya Houghton at (352) 405-6733
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

Enclosed 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**

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. Villages Mind and Body Institute incorporated
(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.)

The Villages Mind and Body Institute 508C1A incorporated
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Washington 3. 81-1954190
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. October 25, 2016 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. 324 S US Hwy 441 Lady Lake, FL 32159
(Principal office address)

(Current mailing address, if different)

8. To perform services (counseling christian) in Florida
(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)

Name: Tonya Houghton

Office Address: 324 S US Hwy 441

Lady Lake, Florida 32159
(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.

Tonya Houghton
(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.

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7 PM 1:25

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Dr Dennis Brady
Address: 324 S. US Hwy 441
Lady Lake, FL 32159
Vice Chairman: Tonya Houghton
Address: 324 S. US Hwy 441
Lady Lake, FL 32159
Director: Steven Myers
Address: 324 S US Hwy 441
Lady Lake, FL 32159
Director: _____
Address: _____

B. OFFICERS

President: _____
Address: _____
Vice President: _____
Address: _____
Secretary: _____
Address: _____
Treasurer: _____
Address: _____

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TALLAHASSEE, FLORIDA
16 NOV - 7 PM 1:26

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

13. Tonya Houghton
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Tonya Houghton, Vice Chairman
(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

**CERTIFICATE OF EXISTENCE
OF
VILLAGES MIND AND BODY INSTITUTE**

I FURTHER CERTIFY that the records on file in this office show that the above named entity
was formed under the laws of the State of Washington and that its public organic record
was filed in Washington and became effective on 10/25/2016.

I FURTHER CERTIFY that the entity's duration is Perpetual,
and that as of the date of this certificate, the records of the Secretary of State
do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest and penalties owed to this state and collected
through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary
of State for filing and that proceedings for administrative dissolution are not pending.

Date: October 25, 2016

UBI: 604-053-411

Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State



SECRETARY OF STATE
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 10/25/2016 BY 1043

16 OCT -7 PM 1:26

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF INCORPORATION

to

VILLAGES MIND AND BODY INSTITUTE

a/an WA Non-Profit Corporation. Charter documents are effective on the date indicated below.

Date: 10/25/2016

UBI Number: 604-053-411



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

Date Issued: 10/25/2016

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SECRETARY OF STATE
FALLMERS OFFICE