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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
W16-80763		

Office Use Only



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11/28/16--01048--001 **78.75

2017 JAN -3 FH 3: 52

M. MILLIGAN JAN - 8 2017

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: SICSTUF MINISTRIES INC. 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 congerning this matter to the following: YOGEN LANE Name of Person		
Address Address Alphonetto Gr 30009 City/State and Zip Code E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call: OGGR DN64 at (770) 569 - 0207 × 7004 Name of Person Area Code & Daytime Telephone Number		
MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: New Filing 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 \$\ \text{Certificate of Status} \ \ \text{Certified Copy} \ \text{Certified Copy} \ \ \text{Certified Copy} \		



FLORIDA DEPARTMENT OF STATE Division of Corporations

hed.

December 2, 2016

BIGSTUF MINISTRIES INC ATTN: ROGER LANEY 31 CHURCH STREET ALPHARETTA, GA 30009

SUBJECT: BIGSTUF MINISTRIES INC

Ref. Number: W16000080763

We have received your document for BIGSTUF MINISTRIES INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date listed in number 6 cannot be more than 90 days after the date of filing. Our office received your document on November 28, 2016.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Michelle Milligan Senior Section Administrator

Letter Number: 916A00025688

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 SUBTREGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDITIVE STATE OF FLORIDA:	
1. OICSTOD MINISTRIES INC. (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbrimport in language as will clearly indicate that it is a corporation instead of a natural person or partnership it in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.	eviations of like f not so contained n.)
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting busin	ness in Florida)
2. GEORGIA (State or country under the law of which it is incorporated) 4. OS / 37 / 20/6 (Date of Incorporation) SH-2772278 (FEI number, if applicable) CERPETUDE (Date of duration, if other than p	erpetual)
6. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determ	
7. 31 CNURCH STREET, ALPHNRETTH, GR (Principal office address) 31 CNURCH STREET, ALPHNRETTH, GR (Current mailing address, if different)	
8. CWRISTIAN YouTh CAMPS (Purpose(s) of corporation authorized in home state of country to be carried out in the state of Florida)	2 2
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: SNEILA KIRKLAND	
Office Address: $36/0 \text{ Mws} \approx 73$ $GRNC6VIUE$, Florida 32440 (City) (Zip Code)	2 0
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated cord designated in this application, I hereby accept the appointment as registered agent and agree to further agree to comply with the provisions of all statutes relative to the proper and complete perduties, and I am familiar with and accept the obligations of my position as registered agent.	poration at the place act in this capacity. I rformance of my
Shorta Leveland (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	Elly Strain
Chairman: / FEG15 JOINTR	
Address: 5870 CNORLOTTE LONE, SUITE Buo,	CUMMINE GA BOOYOR
Vice Chairman: F66/15 GOOFN	
Address: S870 CINNALOTTE LANG, SUTTE 3	wo, Cumming GD 30046
Director: JASON JOSEPH	
Address: S870 CIVARIONTE LANG, SUITE BU	o, Commine Go Zuole
Director: NUSTIN SINGLETON	
Address: 5870 CNNALOTTE LANG, SUTE 30	16) CUMMING &D 30040
B. OFFICERS President: JAMIE EICNLER Address: 3539 LANE BREEDE LANE; GX	O/NESVICE GN 30506
Vice President: 1065R LNV69	
Address: 38 APPLING OPPING; ODWSONNI	116 GP 30534
Secretary: JAM15 EICHLER	
Address: 3539 LANG BREEZE LANG, G.	
Treasurer: /YOBER LANGL Address: 38 APPLING OPIVE! DAWSONI	IIIIC GA ZOSZU
NOTE: If necessary, you may attach an addendum to the application listing	
13. (Signature of Chairman, Vice Chairman, or any officer listed in no	
14. YOGGA L LANGS III VP/CP (Typed or printed name and capacity of person signi	ing application)

Control Number: 16057061

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

BIGSTUF MINISTRIES; INC.

a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

> Docket Number Date Inc/Auth/Filed Jurisdiction

Print Date Form Number 13769161

:05/27/2016 Georgia

:01/03/2017



Brian P. Kemp Secretary of State