

F17000000175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

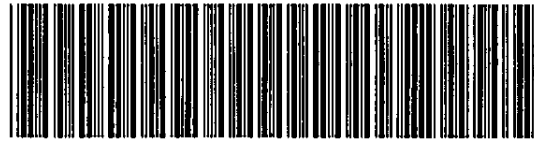
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Address W16-85431

Office Use Only



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12/19/16--01038--023 **78.75

2017 JAN 11 P 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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S Warren

JAN 12 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 22, 2016

BONNIE THOMAS
P.O. BOX 2692
PEACHTREE CITY, GA 30269

SUBJECT: SHILOH CHRISTIAN CHURCH, INC.
Ref. Number: W16000085431

We have received your document for SHILOH CHRISTIAN CHURCH, 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 document must contain both the street address of the principal office and the mailing address of the entity.

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: 016A00027250

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shiloh Christian Church, 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 concerning this matter to the following:

Bonnie Thomas
Name of Person

Shiloh Christian Church
Firm/Company

P.O. Box 2692
Address

Peachtree City, GA 30269
City/State and Zip Code

shilohsccc@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bonnie Thomas at (706) 957-5898
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. Shiloh Christian Church, 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)

2. Georgia 3. _____
(State or county under the law of which it is incorporated) (FEL number, if applicable)
4. 8/28/2006 5. perpetual
(Date of Incorporation) (Date of duration, if other than perpetual)
6. 12/15/2016
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 45 Tyler Woods Dr., Sharpsburg, GA 30277
(Principal office address)

P.O. Box 2692, Peachtree City, GA 30269
(Current mailing address, if different)

8. Religious, Missionary, Church service and ministries
(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)

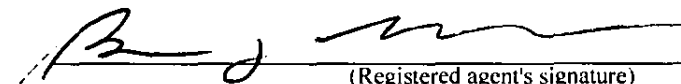
Name: Bonnie Thomas

Office Address: 540 Lago Loop
Davenport, Florida 33837
(City) (Zip Code)

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TALLAHASSEE, FLORIDA

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.*


(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: Bonnie Thomas

Address: 45 Tylerwoods Dr.
Sharpsburg, GA 30277

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Bonnie Thomas

Address: 45 Tylerwoods Dr.
Sharpsburg, GA 30277

Vice President: _____

Address: _____

Secretary: Yeuncheng Tai

Address: 105 Shoal Creek Dr., Sharpsburg, GA 30277

Treasurer: I-ning King

Address: 205 O'Coner Woods Trail, Sharpsburg, GA 30277

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

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

14. Yeun-Cheng Richard Tai, Secretary
(Typed or printed name and capacity of person signing application)

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

Shiloh Christian Church, 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 : 13753807
Date Inc/Auth/Filed : 08/28/2006
Jurisdiction : Georgia
Print Date : 12/15/2016
Form Number : 211



B. P. Kemp

Brian P. Kemp
Secretary of State