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(Req	uestor's Name)	
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(200	iless)	
(City	//State/Zip/Phone	≥ #)
PICK-UP	WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F CORRECTION CONVENCTION ISAAC MENT	to Suffi	

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COVER LETTER

TO:	•	gistration Section vision of Corporations			
CHIDI	ECT: Grace Lif	e Church, Inc.			
SUBJ	ECI:	Name of Corporation	on – must include suffix	 _	
Dear S	ir or Madam:				
Affairs	s in Florida", "Co	tion by Foreign Not for Profit ertificate of Existence", or "C renced not for profit corporati	ertificate of Status" and ch	eck are submitted to	
Please	return all corres	pondence concerning this ma	tter to the following:		
	Isaac M	endoza			
		Name of	f Person		
		Firm/C	ompany	 	
	551 Hui	fstetlet Dr.			
	Unit# 3-	106			
		Add	ress		
	Eustis, I	FL 32726			
	<u> </u>	City/State ar	nd Zip Code		
	houseofg	gracec@gmail.com			
	E-n	nail address: (to be used for fo	uture annual report notifica	ition)	
For fur	ther information	concerning this matter, pleas	e call:		
Isaac I	Mendoza	at (_	379-2105)		
	Name (of Person /	Area Code Daytime Tel	ephone Number	
	MAILING AD Registration Se			URIER ADDRESS:	
	Division of Cor		Registration S Division of Co		
	P.O. Box 6327	•	Clifton Buildi	-	
	Tailahassee, FL	. 32314	2661 Executiv Tallahassee, F	re Center Circle L 32301	
Enclose	ed 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

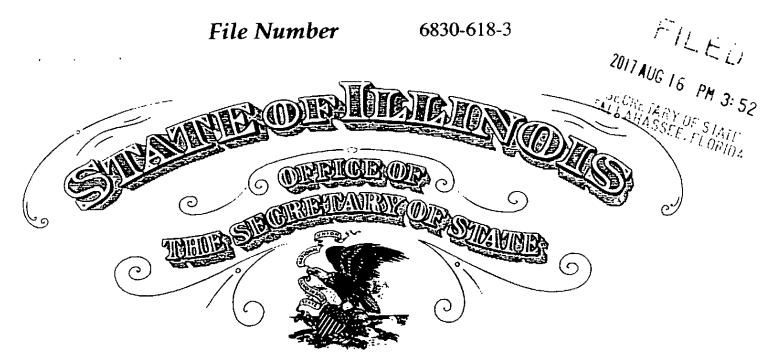
. IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Grace Life C	hurch, Inc. ration: must include the word "INCORPORAT"	ED" or "COR POR A TION" or wards or all	revistions of like
import in langua	age as will clearly indicate that it is a corporation resent. "Company" or "Co." may not be used as	n instead of a natural person or partnership	if not so contained
Vida De Gracia	, INC.		
(If name unava	nilable in Florida, enter alternate corporate name	e adopted for the purpose of transacting bus	siness in Florida)
2. IL	3	45-4233272	
(State or cour	ntry under the law of which it is incorporated)	(FEI number, if applicable))
4. 01/07/2012	Date of Incorporation) 5		
(T	Date of Incorporation)	(Date of duration, if other than	perpetual)
6. 6/30/2017			
(Date first cond	ucted affairs in Florida if prior to registration. See	sections 617.1501 & 617.1502, F.S. to deter	rmine penalty liability.)
7 551 Huffstetle	t Dr. Unit# 3-106, Eustis, FL 32726		
/- 	(Principal o	office address)	
	(Current mailing	address, if different)	
			70. 29
8. to conduct reli	gious worship services		
	corporation authorized in home state or country	to be carried out in the state of Florida)	2017 AUD 16
			05
9. Name and str	eet address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	FOR PR
	Isaac Mendoza		Es in
Name:			52
Office Address:	551 Huffstetlet Dr. Unit# 3-106		
	Eustis	, Florida	
	(City)	(Zip Code)	
Having been na	agent's acceptance: med as registered agent and to accept ser- is application, I hereby accept the appoint	vice of process for the above stated cor tment as registered agent and agree to	poration at the place act in this capacity. I
further agree to	comply with the provisions of all statutes a familiar with and accept the obligations	relative to the proper and complete pe	
11. Attached is the Departm	a certificate of existence duly authenticated tent of State, by the Secretary of State or of	i, not more than 90 days prior to delive her official having custody of corporat	ry of this application to e records in the

jurisdiction under the law of which it is incorporated.

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

A. DIRECTORS	TILE
Chairman:	2017 AUS 1-
Address:	2017 AUG 16 PK
	TALLAHASSE OF SA
/ice Chairman:	
Address:	
Maurice Chabolla Director:	
282 N Cardinal St. Cortland IL, 60112	
Director:	
Address:	
B. OFFICERS	
resident: Isaac Mendoza	
551 Huffstetlet Dr. Unit# 3-106, Eustis FL 32726 Address:	
/ice President:	
Address:	
Paula Lack ecretary:	
4B Kingery Quarter Apart. 107, Willowbrook, IL 60527	
Paula Lack reasurer:	
4B Kingery Quarter Apart. 107, Willowbrook, IL 60527	
NOTE. If necessary, you may attach an addendum to the applica	ation listing additional officers and/or directors.
3 Trucklonslow	-
(Signature of Chairman, Vice Chairman, or any office Isaac Mendoza, President	er listed in number 12 of the application)
(Typed or printed name and capacity of	person signing application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

GRACE LIFE CHURCH, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 07, 2012, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 30TH day of JUNE A.D. 2017.

Authentication #: 1718101188 verifiable until 06/30/2018
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE