

A7000005139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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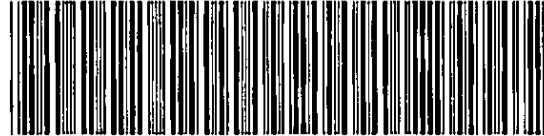
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Grace Unleashed, 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:

Thomas Atkins  
Name of Person

Grace Unleashed, Inc  
Firm/Company

15799 73<sup>rd</sup> Circle North  
Address

Maple Grove, MN 55311  
City/State and Zip Code

tom.atkins@viamde.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tom Atkins  
Name of Person

at ( 612 )  
Area Code

759-1171  
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  
ck # 5851 10/30/17

☐ \$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 Unleashed, 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. State of Minnesota 3. 41-1854018  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/02/1996 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. none  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 15799 73rd Circle North, Maple Grove, MN 55311  
(Principal office address)

(Current mailing address, if different)

8. Christian Outreach events and programs  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

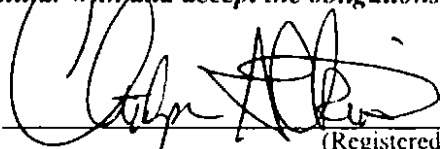
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Christopher Atkins

Office Address: 3118 Spanish Moss Way  
The Villages, Florida 32163  
(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.*



(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.

Attach MN SOS certificate of Good Standing 10/29/2017

12. Names and addresses of officers and/or directors

**A. DIRECTORS**

Chairman: Thomas M. Atkins  
Address: 15799 73<sup>rd</sup> Circle North  
Maple Grove, MN 55311

Vice Chairman: Christopher J. Atkins  
Address: 3118 Spanish Moss Way  
The Villages, FL 32163

Director: Robert H. Gales  
Address: 19025 45<sup>th</sup> Ave North  
Plymouth, MN 55446

Director: Teresa J. Marshall  
Address: 12700 Sherwood Place, #209  
Hopkins, MN 55305

**B. OFFICERS**

President: Thomas M. Atkins  
Address: 15799 73<sup>rd</sup> Circle North, Maple Grove MN 55311

Vice President: Christopher J. Atkins  
Address: 3118 Spanish Moss Way, The Villages FL 32163

Secretary: Robert H. Gales  
Address: 19025 45<sup>th</sup> Ave North, Plymouth MN 55446

Treasurer: Thomas M. Atkins  
Address: (same as above)

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

13. Thomas M. Atkins  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

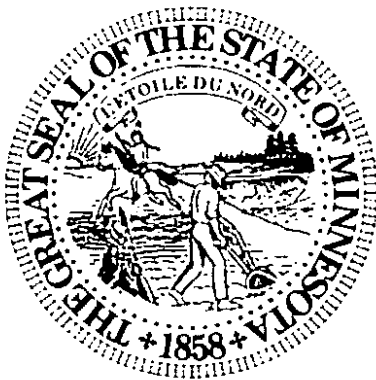
14. Thomas M. Atkins President of Grace Unleashed  
(Typed or printed name and capacity of person signing application)

**Office of the Minnesota Secretary of State  
Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Grace Unleashed, Inc.  
Date Filed: 10/02/1996  
File Number: 1O-640  
Minnesota Statutes, Chapter: 317A  
Home Jurisdiction: Minnesota

This certificate has been issued on: 10/29/2017



*Steve Simon*

Steve Simon  
Secretary of State  
State of Minnesota