F18000001658

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 4/9/2018		*******
		WALK IN
ENTITY NAME	GLOBAL EQUIP MINISTRY, INC	
DOCUMENT NUMBE	R	
	PLEASE FILE THE ATTACHED AND RETURN	
	Plain Copy	
XXXX	Certified Copy	
	Certificate of Status	
	Certified Copy of Arts & Amendments Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTII NUMBER OF CERTIF	NATION UCATES REQUESTED	<u></u>
TOTAL OWED \$78.	75 СНЕСК # 4700	_
Please call Tina a	t the above number for any issues or concerns. Thank you so	mach!

COVER LETTER

	Corporations		
SUBJECT: GLOBA	L EQUIP MINISTRY, INC.		
30 3 0EC1	Name of Corporation	on – must include suffix	
Dear Sir or Madam:			
Affairs in Florida", "	cation by Foreign Not for Profi Certificate of Existence", or "C Terenced not for profit corporati	Certificate of Status" and chec	ck are submitted to
Please return all corr	espondence concerning this ma	itter to the following:	
Dr. P	hilip Gauthier		
	Name o	f Person	
	·	:	
	Firm/C	ompany	
2518	Shadybranch Drive		
			
	Add	dress	
Orla	ido, FL 32 8 22		
	City/State a	nd Zip Code	
dr.pg	authier777@gmail.com		
	-mail address: (to be used for	future annual report notificat	ion)
For further informat	on concerning this matter, plea	se call:	
Dr. Philip Gauthier		518 742.0414	
Nan	ne of Person at (Area Code Daytime Tele	phone Number
MAILING Registration Division of P.O. Box 63 Tallahassee	Section Corporations 27	STREET/COU Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, Fl	rporations lg e Center Circle
Enclosed is a check	for the following amount:		
☐ \$70.00 Filing Fe	e □\$78.75 Filing Fee & Certificate of Status	\$578.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of State 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:

(If name unava	ilable in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida)
NEW YORK	ntry under the law of which it is incorporated	3. 46-3024061 (FEI number, if applicable)
(State or coul	tiry under the law of which it is incorporated	n/a
June 3, 2013	Onto of Incomposition)	5. (Date of duration, if other than perpetual)
	vate of incorporation)	(trace of datation, it offer than perpension)
n/a		See sections 617.1501 & 617.1502, F.S. to determine penalty liability.
(Date first cond	ucted attairs in Florida if prior to registration.	See sections 017.1301 & 017.1302, r.S, to determine penalty thiotily.
2518 Shadybra	anch Rd., Orlando FL 32822	
_	(Princip	pal office address)
		*·.
	(Current mail	ing address, if different)
	(
nonnrofit mini	ietn:	ntry to be carried out in the state of Florida)
nonprofit mini	corporation authorized in home state or coun	ntry to be carried out in the state of Florida)
(i inpose(s) or	to portation dumortized in theme state of to-	9 2
Name and str	eet address of Florida registered agent: ((P.O. Box <u>NOT</u> acceptable)
		5 9
	Dr. P. Gauthier	<u>پ</u>
Name:		
Name:	2518 Shadybranch Dr.	
Name: ffice Address:	2518 Shadybranch Dr.	
Name: fice Address:	2518 Shadybranch Dr. Orlando	Florida ³²⁸²²
Name: fice Address:	2518 Shadybranch Dr.	
fice Address:	2518 Shadybranch Dr. Orlando (City) agent's acceptance:	Florida 32822 (Zip Code)
fice Address: Description: D	2518 Shadybranch Dr. Orlando (City) I agent's acceptance: amed as registered agent and to accept	, Florida 32822 (Zip Code) service of process for the above stated corporation at the pla
fice Address: Description: Registered in the signated in the same agree to	2518 Shadybranch Dr. Orlando (City) I agent's acceptance: amed as registered agent and to accept his application, I hereby accept the apply occumply with the provisions of all statu	Service of process for the above stated corporation at the pla sointment as registered agent and agree to act in this capacity tutes relative to the proper and complete performance of my
fice Address: D. Registered aving been no signated in the other agree to	2518 Shadybranch Dr. Orlando (City) I agent's acceptance: amed as registered agent and to accept his application, I hereby accept the app	Service of process for the above stated corporation at the pla sointment as registered agent and agree to act in this capacity tutes relative to the proper and complete performance of my
fice Address: D. Registered aving been no signated in the other agree to	Orlando (City) I agent's acceptance: amed as registered agent and to accept this application, I hereby accept the application of all status in familiar with and accept the obligation	Florida 32822 (Zip Code) service of process for the above stated corporation at the plane to the proper and agree to act in this capacity that the proper and complete performance of my ons of my position as registered agent.
ffice Address: 0. Registered aving been no signated in the rither agree to	2518 Shadybranch Dr. Orlando (City) I agent's acceptance: amed as registered agent and to accept his application, I hereby accept the apply occumply with the provisions of all statu	Florida 32822 (Zip Code) service of process for the above stated corporation at the plane to the proper and agree to act in this capacity that the proper and complete performance of my ons of my position as registered agent.

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	

Dr. Philip Gauthier		
2518 Shadybranch Dr., Orlando, FL 32822 Address:		_
		- -
John DiMarco Jr. Vice Chairman:		
12 Mallory Avenue, Tarrytown , NY 10591 Address:		
Caroline Gauthier		_
2518 Shadybranch Dr., Orlando, FL 32822 Address:		_
Mary DiMarco Director:		_
12 Mallory Avenue, Tarrytown , NY 10591 Address:		_
B. OFFICERS President: Dr. Philip Gauthier		_
2518 Shadybranch Dr., Orlando, FL 32822 Address:		_
John DiMarco Jr. Vice President:		 일:
12 Mallory Avenue, Tarrytown , NY 10591 Address:	- 8 A-PR	SECRE SECRE
Caroline Gauthier	9	0F (3)
2518 Shadybranch Dr., Orlando, FL 32822 Address:	3	9
Mary DiMarco Treasurer:	<u>.</u> වෙ	
12 Mallory Avenue, Tarrytown , NY 10591 Address:		ਾ 55
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or dir. 13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)		
Dr. Philip Gauthier, Chairman		
(Typed or printed name and capacity of person signing application)		

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of GLOBAL EQUIP MINISTRY, INC. was filed on 06/03/2013, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 05th day of April two thousand and eighteen.

Brendan W. Fitzgerald Executive Deputy Secretary of State

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