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K. SALY
JUL - 6 2018



June 21, 2018

MARIESE A JONES 722 SW 7TH ST HOMESTEAD, FL 33030

SUBJECT: HEDGES AND HIGHWAY OUTREACH MINISTRIES,

INCORPORATED

Ref. Number: W18000057993

We have received your document for HEDGES AND HIGHWAY OUTREACH MINISTRIES, INCORPORATED and your check(s) totaling \$79.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a statement containing the purpose(s) authorized by the jurisdiction of its incorporation, of which it intends to pursue in this state, pursuant to 617.1503(d), Florida Statutes.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

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.

Letter Number: 118A00012997

Jenna D Harris Regulatory Specialist II

COVER LETTER

		TO: Registration Section Division of Corporations			
		SUBJECT: Hedges and Highway Outreach Ministries, Inc.			
		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:			
		Marriese A. Jones Name of Person Hedges and Highway Outreach Ministris, Inc			
8	RECEIVED	Address Homestead FL 33070 City/State and Zip Code Jones Marriese Q gmail Com E-mail address (to be used for future annual report notification)			
	O H A	Ear further information concerning this matter, please call: Ear further information concerning this matter, please call: Ear further information concerning this matter, please call: Ear further information concerning this matter, please call:			
		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 \$\sigma\$\$ \$78.75 Filing Fee & \$\sigma\$\$ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy			
		(money order already, 11			

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: (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' (State or country under the law of which it is incorporated) (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.) Avenue Koad, furrent mailing address, it diff 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Office Address: 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.

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	18 FILED
A. DIRECTORS	18 JUL -2 2
Chairman: WWYKSE () (MES	18 JUL -2 FM 12: 32
Address: 727 W. 7th St.	11 11/1/15
Homestead, FL 33030	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS President: Finabeth A. McLaughlin Address: 5775 N. Dartmouth Ave., Apt. 1-307	
Dinide OD GAINT	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	· · · · · · · · · · · · · · · · · · ·
NOTE: If necessary, you may attach an addendum to the application listing additional of	fficers and/or directors.
(Signature of Chairman, Vice Chairman, of any officer listed in number 12 of	the application)
14. Enworth A. M. Lough In Board of Typed or printed name and capacity of person signing applicant	resident.
(1) ped of printed flattle and captions of person signing applicati	ion)

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

Hedges and Highway Outreach Ministries, Incorporated

is a

Nonprofit Corporation

formed or registered on 06/27/2013 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20131378422.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 06/27/2018 that have been posted, and by documents delivered to this office electronically through 06/28/2018 @ 14:27:51 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 06/28/2018 @ 14:27:51 in accordance with applicable law. This certificate is assigned Confirmation Number 10981467



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://

End of Certificate**

www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."