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M. MILLIGAN MAR 0 8 2019

COVER LETTER

Division of Corporations
SUBJECT: MENDING MINISTRIES CORPORATION
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:
TOMMY BRADHAM
Name of Person
MENDING MINISTRIES CORPORATION
Firm/Company
2860 HAMPTON MEADOW DRIVE
Address
TALLAHASSEE, FL 32311
City/State and Zip Code
TOMMYBRADHAM777@GMAIL.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TOMMY BRADHAM 281 217-6097 at ()
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: Please make check payable to: FLORIDA DEPARTMENT OF STATE
\$70.00 Filing Fee \$\ \text{Certificate of Status} \] \$78.75 Filing Fee & \text{Certified Copy} \] \$87.50 Filing Fee, Certified Copy 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:

. MENDING N	MINDS MINISTRIES COPPORATION			
(Name of corpo import in langu- in the name at p	ration: must include the word "INCORPORATED" or "CORPORATION" or words or abbage as will clearly indicate that it is a corporation instead of a natural person or partnership resent. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.	reviations of if not so coon.)	of like intained	i
(If name unava	ilable in Florida, enter alternate corporate name adopted for the purpose of transacting bus	iness in Flo	rida)	
2. TEXAS	ntry under the law of which it is incorporated) 3. 8/-/317436 (FEI number, if applicable)		,	
(State or cou	ntry under the law of which it is incorporated) (FEI number, if applicable)			
4. FEBRUARY	Date of Incorporation) 5. (Date of duration, if other than			
(L	vate of incorporation) (Date of duration, it other than	ærpetuai)		
6. (Date first cond	ucted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to deter-	nine penalt	y liabili	ty.)
	ON MEADOW DRIVE, TALLAHASSEE, FL, 32311 (Principal office street address)			
	(Principal office street address)			
	(Current mailing address, if different)	 		
		 >- (n	2019	
。(SEE ATTAC	HMENT)	77 fm	喜	
(Purpose(s) of	IMENT) corporation authorized in home state or country to be carried out in the state of Florida)	- 空門	A R	-1:
		3,5	8	-
9. Name and <u>str</u>	eet address of Florida registered agent: (P.O. Box NOT acceptable)	73.35 10.75	PH	TI
Name:	TOMMY BRADHAM	SECRETARY OF STATE	က် ऋ	
Office Address:	2860 HAMPTON MEADOW DRIVE	41 <u>0</u> 5	00	
	TALLAHASSEE , Florida 32311 (Zip Code)	-3.		
	(City) (Zip Code)			
Having been no	agent's acceptance: med as registered agent and to accept service of process for the above stated corp	poration a	t the p	lace
further agree to and I am famili	is application, I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper and complete per arr with and accept the obligations of my position as registered agent.	formance	of my	uy. 1 duties,
Ž	A			
	(Registered agent's signature)			
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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.

TO DEVOTE AND APPLY THE ASSESTS AND/OR PROPERTY OF THE CORPORATION AND THE INCOME TO BE DERIVED THEREFROM EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AS AMENDED, INCLUDING FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (OR THE CORRESPONDING PROVISION OF ANY FUTURE UNITED STATES INTERNAL REVENUE LAW).

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12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOR □Chairman	Name: TOMMY BRADHAM	□Chai r man	Name:				
□Vice Chairman	Address: 2860 HAMPTON MEADOW DR	□Vice Chairman					
□Director	TALLAHASSEE, FL 32311	□Director		· · · · · · · · · · · · · · · · · · ·			
■President		□President	 				
□Vice President		□Vice President					
□Secretary	□Treasurer	☐Secretary		☐Treasurer			
Other:	☐ Other:	Other:		Other:			
□Chairman	Name:	□Chairman	Name:	2019			
□Vice Chairman	Address: 3844 MAGELLAN CT.	□Vice Chairman		A TI			
□Director	TALLAHASSEE, FL 32303	Director		35A -			
□President		□President		mo -p 111			
□Vice President		□Vice President		25 5			
□Secretary	■Treasurer	□ Secretary		□Treasurer			
Other:	Other:	Other:		Other:			
□Chairman	Name: CYNTHIA MODIQUE	□Chairman	Name:				
□Vice Chairman	Address: 1411 SAWMILL ROAD						
Director	THE WOODLANDS, TX 77380	Director	Address.	· · · · · · · · · · · · · · · · · · ·			
□President		□President					
□Vice President		□Vice President					
Secretary	□Treasurer	☐Secretary		☐Treasurer			
□Other:	□ Other:	Other:		Other:			
Non-indexed indiv	t Notice: Use an attachment to report more than size iduals may be added to the index when filing you (Signature of Chairman, Vige Chairman, or any o	r Florida Department o	f State Annua	l Report form.			
TOMMY BRADHAM (Typed or printed name and capacity of person signing application)							

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Mending Ministries (file number 802381251), a Domestic Nonprofit Corporation, was filed in this office on February 01, 2016.

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: February 02, 2016

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 08, 2019.



Phone: (512) 463-5555

Prepared by: SOS-WEB

David Whitley Secretary of State

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 873093480003