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(Address)
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(City/State/Zip/Phone #)
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2012 Reyert W1900058860
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2019 AUG 15 PH 4: 23 SECNELARY OF STATE.

Y SCOTT AUG 1 6 2019



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 22, 2019

NAVPREET SAHI 12763 NW 13TH CT CORAL SPRINGS, FL 33071

SUBJECT: SANT NIRANKARI MISSION (UNIVERSAL BROTHERHOOD) INC.

Ref. Number: W19000058860

We have received your document for SANT NIRANKARI MISSION (UNIVERSAL BROTHERHOOD) INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Yvette Scott Document Specialist II 250 245 6919

Letter Number: 819A00012617

RECEIVED

COVER LETTER

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.

SUBJECT: SANT NIRANKARI MISSION (UNIVERSAL BEOTHERHOOD) INC.

Name of Corporation - must include suffix

TO: Registration Section

Dear Sir or Madam:

Division of Corporations

- rouse rotatil air corresp	condende concerning this m	atter to the to	ollowing:			
	NAVPRE Name	ET SAN				
	Name	of Person	1			
SAN	T NIRANKARI M	SSION (universa	L BESTH	ek jiool	\$
	Firm/C	Company		CRE IVE	AUG 15	
	12763	lw 13 dress	TH CT.	Y OF STAT EE. FLORI	5 PH 4: 20	
COR	City/State	FL 336 and Zip Code	071	Dmi A	ဩ	
FOR-	TLANDERDALE @ ail address: (to be used for	Ni RAN future annua	LARI.OR	(-		
For further information	concerning this matter, plea	ase call:				
NAVPREET SA	AHi at (954 Area Code	214-79 Daytime Tele	2.6 ephone Number		
MAILING AD Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations		Registration S Division of Co Clifton Buildi	orporations ng ve Center Circle		
Enclosed is a check for	the following amount:					
□ \$70.00 Filing Fcc	78.75 Filing Fee & Certificate of Status	□\$78.75 F Certifie	iling Fee & d Copy	\$87.50 Fi Certifica Certified	te of Stati	us &

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:

THAS	lirankari	Mission (UNNERS	AL BE	THERHOOD)	INC.		
(Name of corporation port in language in the name at pres	tion: must include the as will clearly indices. "Company" or	e word "INCORPO ate that it is a cor "Co." may not be	ORATED" or " poration instead used as a corpo	CORPORA d of a natura orate suffix b	l'ION" or words I person or partite y a nonprofit cor	or abbreviation ership if not so poration.)	s of like contained	
(If name unavaila	able in Florida, enter	alternate corpora	te name adopte	d for the pur	pose of transacti	ig business in l	·lorida)	
(State or countr	v under the law of w	hich it is incorpor	3 ated)	<u> 26-7</u> 印	number, if appli	cable).		
1-	6-1976 te of Incorporation)	,	5	(Date of	duration, if other	than perpetual		
(Date first conduc	2- ted affairs in Florida	f prior to registrati	on. See section:	s 617.1501 d	& 617.1502, F.S. u	o determine pen	alty liability.)	
1.3.4	163 NW	0 m. CT	(OP N	CREING.	S FL 3	४०७।		
	63 NW	(Pri	ncipal office as	ldress)	<u> </u>			
	-some as	asae -	mailing address	s it different	1			
Human la	rell-being by	المصلف در	ماراستانية	eliaion	knowledge	مەدىبىت لەر	my the	walky
by using Spi	returne kylon	لعط المعالم	By to imp	ove the	Comment	musion	pjettine i	سر کا د
(Pumose(s) of co	- Some as well-being by initial know in the box inforation authorized	in home state or	country to be c	arried out in	the state of Flori	da)		Br 02.
. Name and stree	et address of Florid	la registered age	nt: (P.O. Box	NOT acce	ptable)	7		
	NAVPREG 12763 N CORAL SE					917 25	201	
Name: _	PATRE	SAMI				AH	9 AL	-
Mice Address:	12763 N	W 1340	<u></u>			— ASI	<u> </u>	<u> </u>
<u>_</u>	WRAL SP	Pinas_	, Flo	orida	33071	<u></u>	55 1	
		(City)			(2.1p C		7 1	
10. Registered	agent's acceptanc	e:				97.	مراجع المراجع	10a
esignatea in tru	ngent's acceptance ned as registered of s application, I be comply with the p familiar with and	rovivions of all	statutes relati	ve to the pi	roper and comp	lete përforme	this capacity ance of my	y. I
	ŕ	R	uet					
		(Re	gistered 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.

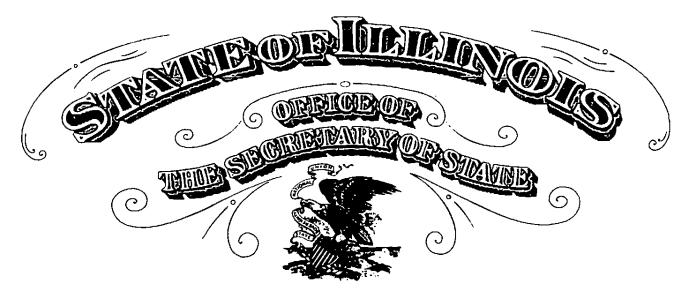
. . 12: Names and addresses of officers and/or directors

A.	DIRECTORS
	D1112

Chairman:	NAVPREET SAHL	
Address:	12763 NVI 1364 CT.	
	CORAL SPRINGS FL 33071	
Vice Chairm	nan:	
Address:		
Director:	HARJAP CHAHAL	
Address:	12265 ROYAL PALM BLVD. APT# N-5	. '
	(DPA) SKRINGS FL 33065	
		2019 A SECH
		AUL CREE
Address:		AUG 15
B. OFFIC	DR. IBBALJIT SINGH PAI	STA C
		70 A
	3500 WEST KINGDON ROAD	
	LODI, CA 95242	
	ent:	
Address:		·
Secretary:	MR. ARUN AHLUWALIA	
Address:	45 SILVER HOLLOW, NORTH BRUNSWICK, N.	<u> 08902</u>
Treasurer:_	MRS. PREM MEHTA	
Address:	9252 NORTH KILBURN AVE. SKOKIE, IL 6	50076
NOTE: If	necessary, you may attach an addendum to the application listing additional officers a	ınd/or directors.
	Ruck	
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	olication)
14	(Typed or printed name and capacity of person signing application)	
	(1) bott or brittled innue and enhants, or become affections	

File Number

5058-039-3



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

SANT NIRANKARI MISSION (UNIVERSAL BROTHERHOOD), A DOMESTIG OF CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON TANGENRY-06, 1975, 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 LETINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 4TH day of AUGUST A.D. 2019 .

Authentication #: 1921600376 verifiable until 08/04/2020
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE