

F19000004092

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

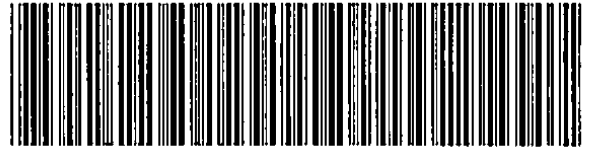
(Document Number)

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

Special Instructions to Filing Officer:

0219000017310

Office Use Only



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08/21/19--01004--007 \*\*\$7.50

2019 SEP -5 PM 4:34

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T GLASS

SEP 06 2019



# God Made Real Ministries

✚ **Vision:** Released Persons serving the Widow, the Orphan, the Outcast, the Stranger and the Prisoner. **Mission:** No One Stays Hurt

September 3, 2019

Tacarri K Glass  
Regulatory Specialist II  
Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Letter Number 319A00017529  
SUBJECT: LAST DOOR, INC.  
Ref. Number: W19000078310

2019 SEP -5 PM 3:16

Dear TK Glass:

Please find in this mailing: 1) a copy of your letter number 319A00017529 regarding the enclosed subject; 2) a CORRECTED filing for LAST DOOR, INC. as a foreign not for profit corporation to conduct its affairs in Florida; and 3) the ORIGINAL filing (TO BE DISCARDED).

Please note there are two (2) typographical errors in the Original Filing, which I have highlighted in yellow: The first is that in **Section 6. Date first conducted business affairs in Florida** should NOT BE 04/18/2018. It should read 04/18/2019. This error caused an Annual Report and penalty fee to be assessed for that calendar year. I apologize for that mistake.

The second typographical error was a benign address numbering error for Edwina Hankins, NOT at 1901, but 1907 E Person Ave.

I have corrected these and sent a new signed filing as corrected. I trust this is useful in us properly making this filing. Again, I apologize for these mistakes.

Sincerely,  
LAST DOOR, INC.

David Morgenstern  
Chairman

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2310 NE 51<sup>st</sup> Street Lighthouse Point, FL 33064

Tel. 561.236.1929 [Last.Door.Reentry@gmail.com](mailto>Last.Door.Reentry@gmail.com)

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LAST DOOR, 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:

David A. Morgenstern

Name of Person

LAST DOOR, INC.

Firm/Company

2310 NE 51st Street

Address

Lighthouse Point, FL 33064

City/State and Zip Code

last.door.reentry@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David A. Morgenstern

Name of Person

561

at ( )

Area Code

236.1929

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**

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input checked="" type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|--|---|--|

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**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. LAST DOOR, 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. Tennessee 3. 47-5604872  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/12/2015 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. 04/18/2019  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 2310 NE 51st Street Lighthouse Point, FL 33064  
(Principal office street address)

(Current mailing address, if different)

8. Non-profit facility serving disenfranchised persons by reigniting self-sufficiency and well-being in all communities.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

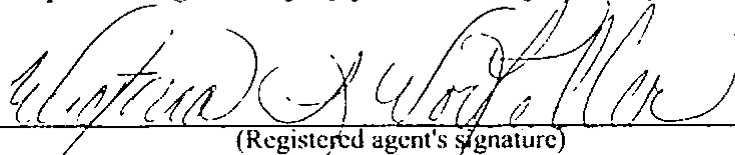
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Victoria L. Vorkeller

Office Address: 2310 NE 51st Street  
Lighthouse Point, Florida 33064  
(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.

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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. DIRECTORS

☒ Chairman Name: David A. Morgenstern  
☐ Vice Chairman Address: 2310 NE 51st Street  
☐ Director Lighthouse Point, FL 30064-7042  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Charles Kinnard  
☒ Vice Chairman Address: 1907 E Person Ave  
☐ Director Memphis, TN 38114-3416  
☐ President \_\_\_\_\_  
☒ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

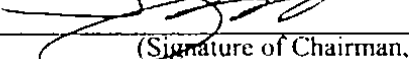
☐ Chairman Name: Victoria L. Vorkeller  
☐ Vice Chairman Address: 2310 NE 51st Street  
☒ Director Lighthouse Point, FL 30064-7042  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Edwina Hankins  
☐ Vice Chairman Address: 1907 E Person Ave  
☒ Director Memphis, TN 38114-3416  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

**NOTE: Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13.  \_\_\_\_\_  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. David A. Morgenstern \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)



Tre Hargett  
Secretary of State

## Division of Business Services

### Department of State

State of Tennessee  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

DAVID A. MORGENSTERN  
2310 NE 51ST STREET  
LIGHTHOUSE POINT, FL 33064-7042

August 19, 2019

**Request Type: Certificate of Existence/Authorization**

Request #: 0326778

Issuance Date: 08/19/2019

Copies Requested: 1

**Document Receipt**

Receipt #: 004975183

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3764050295

\$20.00

**Regarding: LAST DOOR INC.**

Filing Type: Nonprofit Corporation - Domestic

Formation/Qualification Date: 11/12/2015

Status: Active

Duration Term: Perpetual

Business County: SHELBY COUNTY

Control #: 821398

Date Formed: 11/12/2015

Formation Locale: TENNESSEE

Inactive Date:

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**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**LAST DOOR INC.**

\* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;

\* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

\* has filed the most recent annual report required with this office;

\* has appointed a registered agent and registered office in this State;

\* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett  
Secretary of State

Processed By: Cert Web User

Verification #: 034693129