Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000350722 3)))



H190003507223ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

00

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION MILLIONS OF MIRACLES COME TRUE FOUNDATION

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$70.00 |

T GLASS

DEC 05 2019

Help

Electronic Filing Menu

Corporate Filing Menu

COVER LETTER

| TO: | Registration Section Division of Corporations | | | |
|--|---|---|--|--|
| CTIDY | TECT: Millions of Miracles Come True Foundation | | | |
| SUBJ | Name of Corporation - | must include suffix | | |
| Dear S | Sir or Madam: | | | |
| Affairs | nclosed "Application by Foreign Not for Profit Cor s in Florida", "Certificate of Existence", or "Certifi er the above referenced not for profit corporation to | cate of Status" and check are submitted to | | |
| Please | return all correspondence concerning this matter t | o the following: | | |
| | Connie S. Bookholt | | | |
| | Name of Per | son | | |
| | Flrm/Comp | any | | |
| | | 2019 DEC | | |
| | 4050 Cypress Hammock Lane | D _C C | | |
| | Address | 1 | | |
| | Pompano Beach, Florida 33069 | ip Code | | |
| | City/State and Z | ip Code | | |
| | cbookholi@nationalgroup.com | , r | | |
| | E-mail address: (to be used for future | | | |
| For fu | rther information concerning this matter, please ca | 11: | | |
| Hayda | on M. Baker 214 | 855-3140 | | |
| | 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 | | |
| Enclos | sed is a check for the following amount: make check payable to: FLORIDA DEPARTMENT (| DE STATE | | |
| _ | · | 578.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & 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:

| l | linacles Come True Foundation | | |
|---------------------|--|--|----------|
| import le langue | age as will clearly indicate that i | NCORPORATED" or "CORPORATION" or words or abbreviations of like t is a corporation instead of a natural person or partnership if not so contained y not be used as a corporate suffix by a nonprofit corporation.) | |
| Millions of l | Miracles Come True Foundatio | on, Inc. | |
| (If name unave | rilable in Florida, enter alternate | corporate name adopted for the purpose of transacting business in Florida) | |
| 2. Delaware | | 3, 83-2050448 | |
| • | ntry under the law of which it is | incorporated) (FEI number, if applicable) | |
| 4. September 25, | 2018 | 5 | |
| (I | Date of Incorporation) | (Date of duration, if other than perpetual) | |
| 6. (Date first cond | ucted affairs in Florida if wire to | registration. See sections 617.1301 & 617.1502, F.S., to determine penalty liability.) |) |
| | | | , |
| 7. 3821 NE 14th | Avenue, Fort Lauderdale, Florid | (Principal office street address) | |
| | | (rinicipal office street and ess) | |
| | | Current mailing address, if different) | |
| | · | | |
| 8 1986 | | fills, literary, anthra charaterial purposes within the mouning of Section 301(4)(1) of the Internal Reverse Code of | 20 |
| (Purpose(s) of | corporation authorized in home | state or country to be carried out in the state of Plorida) | 181 |
| 9. Name and str | eet address of Florida register | red agent: (P.O. Box NOT acceptable) | 2019 DEC |
| | • | * · · · · · · · · · · · · · · · · · · · | <u></u> |
| Name: | Connie S. Bookholt | | |
| Office Address: | 5821 NE 14th Avenue | | PH 12: 2 |
| | Fort Lauderdale | , Florida 33334 | ₹ |
| | (City) | (Zip Code) | 27 |
| 10. Registered | l agent's acceptance: | | _ |
| Having been no | uned as registered agent and | to accept service of process for the above stated corporation at the plan | ce |
| further agree to | comply with the provisions | pt the appointment as registered agent and agree to act in this capacity of all statutes relative to the proper and complete performance of my d | uties, |
| and I am famili | ar with and accept the oblige | ations of my position as registered agent. | |
| | 1 | | |
| | (/# | (Registered agents's signature) | |
| | | (Registered agent's signature) | |
| the Departn | a certificate of existence duly nent of State, by the Secretary under the law of which it is i | y authenticated, not more than 90 days prior to delivery of this application of State or other official having custody of corporate records in the incorporated. | m to |

Taylor Seay 8004323622

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 Vice Chairman Director President Vice President Secretary | Name: Peter E. Bookholt Address: 4050 Cypress Hammock Lane Pompano Beach, Florida 33069 | □Chairman □Vice Chairman ■Director □President ■Vice President □Secretary | Address: Alten, 1 | Demian S. Larson 506 Burke Drive Coxes 75002 | |
|--|---|--|-------------------|--|-----------|
| □ Chairman □ Vice Chairman | Name: Connie S. Bookhelt Address: 4050 Cypress Hammock Lane Pompano Beach, Florida 33069 | Other: Chairman Director | Name: | Other: | _ |
| OPresident | #Tressurer | OPresident OVice President OSecretary | | CT reasurer | 1 12019 |
| □Other: | | [] Other: | | Other: | 19 Dq. |
| □Chairman □Vice Chairman □Director □President | Name: | □Chairman □Vice Chairman □Director □President | Address: | | 7 / 2 |
| □Vice President □Secretary □Other: | DTreasurer D Other: | □ Other: | | ☐Treasurer | — |
| NOTE: Importan Non-indexed indiv 13 | Notice: Use an attachment to report more than sividuals may be added to the index when filing your Support of Chairman, or any ocokholt, Director (Typed or printed name and capacity of p | r Florida Department of | of State A | nnual Report form. | γ. |

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MILLIONS OF MIRACLES COME TRUE

FOUNDATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE

THIRD DAY OF DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MILLIONS OF MIRACLES COME TRUE FOUNDATION" WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF SEPTEMBER, A.D. 2018.

2019 DEC -4 PH 12: 27

7061145 8300C SR# 20198403648

You may verify this certificate online at corp.delaware.gov/authver.shtml

MSR

Authentication: 204124441

Date: 12-03-19