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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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| TO: | Registration Section Division of Corporations | | | | | | | |
|--|---|-------------|--|--|---|--|--|--|
| SUBJ | Г <i>С</i> Т. | Kingdon | of God Fellowship Church Inc. | | | | | |
| SUBJ | ECI | <u> </u> | Name of Corporation | n – must include suffix | - | | | |
| Dear S | ir or Ma | ıdam: | | | | | | |
| Affairs | in Flor | ida", "Ce | ion by Foreign Not for Profit rtificate of Existence", or "Ce enced not for profit corporation | rtificate of Status" and ch | eck are submitted to | | | |
| Please | return a | ill corresp | ondence concerning this mate | ter to the following: | | | | |
| | | Rose Wi | nite | | | | | |
| | | | Name of | Person | | | | |
| | Wise Business Choices Inc | | | | | | | |
| | | | Firm/Co | ompany | | | | |
| | 1535 Blanding Blvd, #405 | | | | | | | |
| | | | | | | | | |
| | | | Add | ress | | | | |
| | | Middleb | urg. FL 32068 | | | | | |
| | City/State and Zip Code wisechoicesincorporated@gmail.com | | | | | | | |
| | | | | | | | | |
| | | E-n | nail address: (to be used for fi | ature annual report notific | ation) | | | |
| For fu | nther inf | ormation | concerning this matter, please | e call: | | | | |
| Rose | White | | at (| 352 247-5718 | | | | |
| | | Name o | of Person / | Area Code Daytime Te | lephone Number | | | |
| Mailing Address: | | | | Street Address: | | | | |
| Registration Section | | | | Registration Section | | | | |
| Division of Corporations P.O. Box 6327 | | | | Division of Corporations The Centre of Tallahassee | | | | |
| Tallahassee, FL 32314 | | | | 2415 N. Monroe Street, Suite 810 | | | | |
| | Tana | iassee, i | L 32314 | Tallahassee, FL 323 | · | | | |
| | | | the following amount: | | | | | |
| | | | e to: FLORIDA DEPARTMEN | | □¢07 €0 EHL - F | | | |
| = \$70 |).00 Fili | ng rec | □\$78.75 Filing Fee & Certificate of Status | □\$78.75 Filing Fee & Certified Copy | □\$87.50 Filing Fee, Certificate of Status & Certified Copy | | | |



February 12, 2020

ROSE WHITE 1535 BLANDING BLVD #405 MIDDLEBURG,

SUBJECT: KINGDOM OF GOD FELLOWSHIP CHURCH INC.

Ref. Number: W20000014800

We have received your document for KINGDOM OF GOD FELLOWSHIP CHURCH INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 620A00003199



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:

| Kingd | lom of God Fellowship | Church Inc. | | | | | |
|--|--|---|---|--|-----------------------------|-------------------|----------------------------|
| (Name of corpo | ration: must include the age as will clearly indic resent. "Company" or ' | ate that it is a | corporation instead | l of a natural person o | or partnership | if not se | ons of like o contained |
| KOGFC Inc. | | | | | | | |
| (If name unava | ailable in Florida, enter | alternate corpo | orate name adopted | I for the purpose of to | ransacting bus | siness in | Florida) |
| North Carolin | a | | 3.47-5679 | 9485 | | | |
| | a ntry under the law of w | | ,,,,,,,, | (| | | |
| February 4, 2 | :015 | | 5 | | | | |
| ([| 2015 5. Date of Incorporation) 5. (Date of duration, if other than | | | | if other than | perpetua | al) |
| January | | | | | | | |
| (Date first cond | ucted affairs in Florida i | f prior to regist | ration. See sections | 617.1501 & 617.150. | 2, F.S, to deter | mine per | nalty liability.) |
| 1769 Mt. | Carmel Church Road, | Reidsville, NO | 27320 | | | | |
| | | (Pri | ncipal office street | address) | | ~ | |
| | | | | | 17 mg | | |
| | | (Сиггет | nt mailing address, | if different) | 3440 | 뀒 | \$ 2.5 |
| | | | | | | ₩ | |
| Online Chu | rch, Home Fellowship | and Christian I | Ministry | | 1 (3) ₂₀ (| 4 | M |
| (Purpose(s) of | corporation authorized | in home state of | or country to be ca | rried out in the state of | of Florida) | - TO - | |
| (1 41)/200(0) 01 | corporation authorized | | vou, 15 ov | | 25 | T.a | |
| Name and str | eet address of Florida | a registered a | gent: (P.O. Box <u>I</u> | NOT acceptable) | 1 3 4 1 2 1 4 | O. | |
| Name: | Rose White | | | | | | |
| ffice Address: | 1535 Blanding Blvd, | #405 | | | | _ | |
| | Middleburg | | Flor | rida 32068 (Zip C | | | |
| | (Ci | ty) | , , , , , , , | (Zip C | Code) | - | |
| | | | | (2.1) | , | | |
| laving been na esignated in th erther agree to | l agent's acceptance imed as registered ag is application, I her comply with the pro ar with and accept to | gent and to ace by accept the ovisions of ali | e appointment as l statutes relative | s registered agent of to the proper and | and agree to complete pe | act in t | this capacity. |
| | |) | | | | | |
| | | | 1 | | | | |
| | | al 1 | White | | | | |
| mu I um jumni | ar with and accept to | | Sof my position | - | | | |

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

| A. DIRECTOR | AS | | | | | | |
|---|---------------------------------------|-----------------|----------------------------------|--|--|--|--|
| □Chairman | Rose White Name: | Chairman | | | | | |
| □Vice Chairman | Address: 1535 Blanding Blvd, #405 | □Vice Chairman | 5 Burland Place Address: | | | | |
| □Director | Middleburg, FL 32068 | ■Director | Palm Coast, FL 32037 | | | | |
| ■ President | | □President | | | | | |
| □Vice President | | □Vice President | | | | | |
| ☐ Secretary | □Treasurer | ☐ Secretary | Treasurer | | | | |
| Other: | Other: | □Other: | ☐Other: | | | | |
| □ Chairman | Barbara Baker Name: | □ Chairman | John Brown | | | | |
| | 1769 Mt. Carmel Church Rd Address: | □ Vice Chairman | Address: 1535 Blanding Blvd #405 | | | | |
| □Director | Reidsville, NC 27320 | □Director | Middleburg, FL 32068 | | | | |
| □President | | □President | | | | | |
| ■Vice President | | □Vice President | | | | | |
| ☐ Secretary | □Treasurer | □Secretary | ■ Treasurer | | | | |
| □Other: | ☐ Other: | Other: | Other: | | | | |
| Chairman | Tonya Waller | □ Chairman | Name: | | | | |
| | Address: | | Address: | | | | |
| Director | Harlem, GA 30814 | □Director | | | | | |
| □President | | □President | | | | | |
| □Vice President | | □Vice President | | | | | |
| Secretary | □Treasurer | ☐ Secretary | □Treasurer | | | | |
| □Other: | ☐ Other: | □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. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Rose White. President (Typed or printed name and capacity of person signing application) | | | | | | | |



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

KINGDOM OF GOD FELLOWSHIP CHURCH, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 4th day of December, 2015, with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 21st day of February, 2020.

Elaine I Marshall

Secretary of State