# F200000015401

(Re	equestor's Name)			
(Address)				
(Address)				
(Cid	ty/State/Zip/Phone	<del>: #)</del>		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

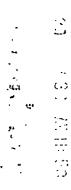
Office Use Only





700354600817

11/16/20--01009--029 \*\*87.50



TEC 04 200 TELETIMETRY

TO:	Registration Section Division of Corporations					
SHRI	JECT: Union Chapel Ministries Inc					
5000	Name of Corporation – must include suffix					
Dear S	Sir or Madam:					
Affair	nclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its rs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to er the above referenced not for profit corporation to conduct its affairs in Florida.					
Please	e return all correspondence concerning this matter to the following:					
	Kelly Barcol					
	Name of Person					
	MOVE Daytona					
	Firm/Company					
	111 Claire Terr.					
	Address					
	Daytona Beach, FL 32118					
	City/State and Zip Code					
	movedaytona@gmail.com					
	E-mail address: (to be used for future annual report notification)					
For fu	urther information concerning this matter, please call:					
Kelly	Barcol 229 834-1984 at ( )					
-	Name of Person Area Code Daytime Telephone Number					
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303					
Please	Tallahassee, FL 32303  used is a check for the following amount:  use make check payable to: FLORIDA DEPARTMENT OF STATE  0.00 Filing Fee \$\Bigsim \frac{\pi}{2}\$78.75 Filing Fee & \$\Bigsim \frac{\pi}{2}\$87.50 Filing Fee.  Certificate of Status Certified Copy  Certified Copy					



November 18, 2020

KELLY BARCOL 111 CLAIRE TERR DAYTONA BEACH, FL 32118

SUBJECT: UNION CHAPEL MINISTRIES INC

Ref. Number: W20000132698

We have received your document for UNION CHAPEL MINISTRIES INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The second page of the document was not included. You will need to have a officer or director sign that page.,

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

RECEIVED NOV 30 2020

Letter Number: 020A00023269

### 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:

Union Chapel	Ministries Inc	
(Name of corpo import in langua in the name at p	ration: must include the word "INCORPORATED" or "CORPORATION" or words or a age as will clearly indicate that it is a corporation instead of a natural person or partnersl resent. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corpor	abbreviations of like hip if not so contained ration.)
MOVE Daytona	1	
(If name unava	ilable in Florida, enter alternate corporate name adopted for the purpose of transacting	business in Florida)
2. Indiana	> FIN# 35-1587501	
(State or cour	3. EIN# 35-1587501 http://under.the.law.of.which.it.is.incorporated) (FEI number, if applicable)	ole)
· ([	2013 5. (Date of duration, if other the	an perpetual)
6. <u>N/A</u>		
(Date first cond	ucted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to de	termine penalty liability.)
7 4622 N Broad	vay Ave. Muncie, IN 47303	
· ·	(Principal office street address)	
<del></del>	(Current mailing address, it different)	<del> </del>
8. Religous Orga	nization	
8. (Purpose(s) of	corporation authorized in home state or country to be carried out in the state of Florida)	$\frac{A_{i}^{\mu}}{2}$ $\frac{\omega}{2}$
•		
9. Name and <u>str</u>	eet address of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	Kelly Barcol	· · · · · · · · · · · · · · · · · ·
Office Address:	Kelly Barcol 111 Claire Terr.	
	Daytona Beach Fl. 32118 (City) (Zip Code)	
	(City) (Zip Code)	<del>-</del>
Having been no designated in th	agent's acceptance: imed as registered agent and to accept service of process for the above stated of is application, I hereby accept the appointment as registered agent and agree comply with the provisions of all statutes relative to the proper and complete ar with and accept the obligations of my position as registered agent.	to act in this capacity. 1
	(Registered agent's signature)	<del></del>
the Departn	a certificate of existence duly authenticated, not more than 90 days prior to delinent of State, by the Secretary of State or other official having custody of corporander the law of which it is incorporated.	very of this application to rate records in the

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

A. DIRECTOR						
<b>■</b> Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	Yorktown, IN 47396-9252	□Dir <del>e</del> ctor	Muncie, 1N 47303			
□President		□President	·			
□Vice President		□Vice President				
☐ Secretary	Treasurer	<b>■</b> Secretary	☐ Treasurer			
Other:	☐ Other:	□Other:	□Other:			
□Chaiπnan	Greg Posey	<b>■</b> Chairman	John Dragoo Name:			
□Vice Chairman	Address:	□Vice Chairman	Address: 620 S Riviera Ln			
□Director	Muncie, IN 47304	□Director	Yorktown, IN 47396			
□President		□President				
□Vice President		□Vice President				
☐ Secretary	Treasurer	☐ Secretary	□ Treasurer			
□Other:	Other:	□Other:	□Other:			
□Chairman	Name:	□Chairman	Name:			
□Vice Chaiπnan	Address:	□Vice Chairman	Address:			
□Director		□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.  13. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)  14. Greg Posey, Accounting Manager						
(Typed or printed name and capacity of person signing application)						

## State of Indiana Office of the Secretary of State

#### CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

### UNION CHAPEL MINISTRIES INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on December 20, 2013, and was in existence or authorized to transact business in the State of Indiana on October 29, 2020.

I further certify this Domestic Nonprofit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, October 29, 2020

Corrie Famon

CONNIE LAWSON SECRETARY OF STATE

2013122600209 / 20201690772

All certificates should be validated here: https://bsd.sos.in.gov/ValidateCertificate Expires on November 28, 2020.