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(((H210002244113)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone

: (323)962-8600

Fax Number

: (323)962-3889

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

F 1				

FOREIGN PROFIT/NONPROFIT CORPORATION

P.R.B. Ministries Inc.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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Help



Ta: 18506176383

3239628300

From: Meghan Smith

COVER LETTER

10:	Registration Section Division of Corporations	
SUR.	JECT: P.R.B. Ministries Inc.	
(U D	Name of Corporation - must include suffix	
Dear	Sir or Madam:	
A ffair	inclosed "Application by Foreign Not for Profit Corporation for Authorization to Crs in Florida", "Certificate of Existence", or "Certificate of Status" and check are set the above referenced not for profit corporation to conduct its affairs in Florida.	Conduct its ubmitted to
Pleas	e return all correspondence concerning this matter to the following:	
	Cheyenne Moseley	
	Name of Person	_
	Legalzoom com, Inc.	
	Firm/Company	2021 JUN -7
	101 N Brand Blvd 10th Floor	
	Address	
	Glendate, CA 91203	PH 5: 13
	City/State and Zip Code	_ ~ ~
	pastorrickbettez@gmail.com	
	E-mail address: (to be used for future annual report notification)	_
For fi	byther information concerning this matter, please call:	
Chey	yenne Moseley 800 773-0888	
	Name of Person Area Code Daytime Telephone	Number
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons er Circle
	osed is a check for the following amount: e make check payable to: FLORIDA DEPARTMENT OF STATE	
	Certificate of Status Certified Copy C	87.50 Filing Fee, 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:

import in langua	ration: must incluage as will clearly resent. "Company	tedt etenibui v	it is a corporation	on instead o	f a natural pe	erson or partners	thin if not so	s of like contained	
in the name at p	resent. Compan	y or co. ma	ay not be dised a	3 a corporar	c some of a	tionpront co.p.			
(If name unava	ailable in Florida,	enter alternate	e corporate nam	e adopted fo	or the purpos	e of transacting	business in I	·lorida)	
Rhode Island			•	82-272640	7				
(State or cou	ntry under the lav	v of which it is	s incorporated))· <u> </u>	(FEI nu	mber, if applica	ble)		
•	· ·			:					
· (I	Date of Incorpora	lion)	 ,	' ·	(Date of dur	ration, if other th	ian perpetual)	
6. 04/15/2021									
b. (Date first cond	lucted affairs in Fl	orida if prior to	registration, Sca	e sections 61	7.1501 & 61	7.1502, F.S. to d	etermine pena	iliy liabilii	(y)
•			•						
7. 13394 ŞW 421	no Circie, Ocaia,	FL 34473	(Principal off	ice street a	idress)				
			(1 morpai on		30,000,				
							٠.	_ <u>z</u> _	
		(Current mailing	g address, if	different)		الديمه المراجعة	PHUL IS	
								至	و به . جمعینی
8. Church	corporation author						7 51		وسيس
(Purpose(s) of	corporation author	onzed in home	state or countr	y to be carri	ed out in the	state of Florida) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A	0	* 34
9. Name and str	eet address of E	lorida registo	ered agent: (P.	O. Box NO) I' acceptab	ole)	€13.7 (44.7.7 (44.7.7)	PH 5: 13	
5. Name and <u>50.</u>	<u> </u>	101704 108.51				,		ာ တွာ	
Name:	United States C	orporation Ag	ents, Inc.				نشا	် ပ်	,
	5575 S. Semoran Blvd., Suite 36								
Office Address:	_				22822				
	Orlando	(City)		, Floric	la <u>32822</u>	(Zip Code)			
		(City)			!	(Zip Code)			
10. Registered Having been no designated in the further agree to and I am famil	amed us registe his application, o comply with to	red agent an I hereby acc he provisions	ept the appoir of all statute:	rtment as r s relative to	egistered a _l the proper	gent and agree r and complete	e to act in ti	нь сарас	aty. T
·) NV		-	Cheyenne Mo behalf of Uni			
			(Registered	d agent's sig	nature)				
the Departs	s a certificate of ment of State, b i under the law	y the Secreta	ry of State or o	other offici	e than 90 d al having co	ays prior to de ustody of corpo	livery of thi orate record	s applica s in the	tion to

To: 18506176383 •

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2021-06-07 08:36:40 PDT

3239628300

From: Meghan Smith

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

A. DIRECTOR				0 - 0 -			
□Chairman	Name: Richard Bettez	Chairman	Name: Sonia Bettez				
□Vice Chairman	Address: 13394 SW 42nd circle	Vice Chairman	Address: 13394 SW 42nd circle				
□Director	Ocala, FL 34473	■Director	Ocala, FL 34473				
■President		DPresident					
□Vice President		□Vice President					
□Secretary	O'Treasurer	■ Secretary		≘ Treasurer			
□Other:	Other:	Other:		Other:			
□ Clvairman	Name:	Chairman	Name				
□Vico Chairman	Address:	Dvice Chairman	Address:				
□Director		□Director					
□President		President					
□Vice President		DVice President					
□Secretary	□Treasurer	□ Secretary		□Tressyrior 22			
□Other:	□ Other:	Other:		offer U			
□Chairman □Vice Chairman □Director	Name:	©Vice Chairman	Name: Address:	-7 PH 5: 13			
□President □Vico President		Ovice President					
DSccretary	□Treasurer	□ Secretary		□Treasurer			
□Other,	Qther:	Other:		Other:			
Non-indexed indi	Notice: Use an attachment to report mor viduals may be added to the index when find (Signature of Chairman, Vice Chairman, tez, President (Typed or printed name and capa	ling your Florida Department of any officer listed in number	of State A	annual Report form.			



State of Rhode Island

Department of State | Office of the Secretary of State

Nellie M. Gorbea, Secretary of State

CERTIFICATE OF GOOD STANDING

I, Nellie M. Gorbea, Secretary of State and custodian of the seal and corporate records of the State of Rhode Island, hereby certify that:

P.R.B. Ministries Inc.

is a Rhode Island Non-Profit Corporation organized on August 23, 2017. I further certify that revocation proceedings are not pending; articles of dissolution have not been filed; all annual reports are of record and the corporation is active and in good standing with this office.

This certificate is not to be considered as a notice of the corporation's financial condition or business practices; such information is not available from this office.

SIGNED and SEALED on F

Tulli U. Bola

May 24, 2021

Secretary of State



Certificate Number: 21050096050

Verify this Certificate at: http://business.sos.ri.gov/CorpWeb/Certificates/Verify.aspx

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