## F220000003242

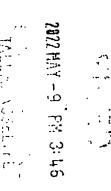
(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
<u></u>				
(C	ity/State/Zip/Phone i	#)		
PICK-UP	☐ WAIT	MAIL		
<b>(</b> B	usiness Entity Name	<del>)</del>		
(C	ocument Number)			
Certified Copies	Certificates of	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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S. ROBERTS MAY 0 9 2022

### **COVER LETTER**

TO:	Registration S Division of O					
CHDI	The King	dom of God Global Church, Inc.				
SUDJ	r.C1:	Name of Corporati	on – must inc	lude suffix	<del> </del>	
Dear S	Sir or Madam:					
Affair	s in Florida", "C	ation by Foreign Not for Profi ertificate of Existence", or "C renced not for profit corporati	ertificate of S	itatus" and ch	eck are submitted to	
Please	return all corre	spondence concerning this ma	itter to the foll	lowing:		
	Welsey	· Carter				
		Name o	of Person			
	Winter	s & King, Inc.				
		Firm/C	Company			
	2448 E 81st St, Ste. 5900					
				<u> </u>		
			dress			
	Tulsa,	OK 74137				
		City/State a	nd Zip Code			
	·	@wintersking.com				
	Е-	mail address: (to be used for	future annual:	report notifica	ation)	
For fu	ther informatio	n concerning this matter, plea	se call:			
Wesley Carter		at (	918 4	94-6868		
	Name	of Person	Area Code	Daytime Tel	ephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Please	ed is a check fo make check payal 1.00 Filing Fee	r the following amount: ble to: FLORIDA DEPARTME  □\$78.75 Filing Fee &  Certificate of Status	NT OF STAT □\$78.75 Fil Certifie	ing Fee &	□\$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:

(If name unav	ailable in Florida, enter alternate co	rporate name adopte	d for the purpose of transacting b	usiness in	Florida)	•
Missouri		3, 81-195	992			
	ntry under the law of which it is inc					3
01/12/2016	Date of Incorporation)	5				
	Date of Incorporation)		(Date of duration, if other tha	n perpetua	1)	•
11/01/2021						
Date first cond	lucted affairs in Florida if prior to regi	stration. See sections	617.1501 & 617.1502, F.S. to dete	ermine pen	alty liabili	ity.)
008 Victory	Way Lane, St. Louis, MO, 63138					
	(P	rincipal office stree	t address)			
	Com					
		ent mailing address	if different)			
	(Curi	ent mailing address.	. if different)			
'hurch		C	·			
Church		C	·		-2:-	
Church Purpose(s) of	corporation authorized in home state	C	·		<b>2</b> 022	
Purpose(s) of		e or country to be ca	rried out in the state of Florida)	Ā	ZÓZZ MAN	Ca ang
Name and <u>str</u>	corporation authorized in home state	e or country to be ca agent: (P.O. Box ]	rried out in the state of Florida)  NOT acceptable)	An An E	Z022 MAY -	172.20°E
Purpose(s) of Name and str Name:	eorporation authorized in home state eet address of Florida registered InCorp Services, Inc.	e or country to be ca agent: (P.O. Box <u>I</u>	rried out in the state of Florida)  NOT acceptable)	AC C	-9	1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -
Purpose(s) of Name and str Name:	eorporation authorized in home state eet address of Florida registered InCorp Services, Inc.	e or country to be ca agent: (P.O. Box <u>I</u>	rried out in the state of Florida)  NOT acceptable)	ALC:		1-12 32-18 4 4 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Purpose(s) of Name and str Name:	eorporation authorized in home state eet address of Florida registered InCorp Services, Inc.	e or country to be ca agent: (P.O. Box <u>I</u>	rried out in the state of Florida)  NOT acceptable)	AC A A A A A A A A A A A A A A A A A A	-9 PH	1-12-20-11 
Purpose(s) of Name and str	eorporation authorized in home state eet address of Florida registered InCorp Services, Inc.	e or country to be ca agent: (P.O. Box <u>I</u>	rried out in the state of Florida)  NOT acceptable)	ALC: A CONTRACT OF THE PROPERTY OF THE PROPERT	-9	172.32 PQ
Purpose(s) of lame and <u>str</u> Name: ice Address:	eer address of Florida registered InCorp Services, Inc. 17888 67th Court North Loxahatchee (City)	e or country to be ca agent: (P.O. Box <u>I</u>	rried out in the state of Florida)  NOT acceptable)		-9 PH	172.32mg
Purpose(s) of Name and str Name: The Address: Registered	eet address of Florida registered InCorp Services, Inc. 17888 67th Court North Loxahatchee (City)	e or country to be ca agent: (P.O. Box <u>I</u>	rried out in the state of Florida)  NOT acceptable)  rida 33470 (Zip Code)		-9 PH 3: 45	ر الم
Purpose(s) of Name and str Name: ice Address: Registered ving been na	eet address of Florida registered InCorp Services, Inc. 17888 67th Court North Loxahatchee (City) I agent's acceptance: uned as registered agent and to as application. I hereby accept the	agent: (P.O. Box I	rried out in the state of Florida)  NOT acceptable)  rida 33470 (Zip Code)  process for the above stated cost revistered agent and agree to	rporation	i at the pi	place
Purpose(s) of lame and str Name: ice Address: Registered sing been na ignated in the	eet address of Florida registered InCorp Services, Inc. 17888 67th Court North Loxahatchee (City) I agent's acceptance: amed as registered agent and to this application, I hereby accept to comply with the provisions of a	agent: (P.O. Box I	rried out in the state of Florida)  NOT acceptable)  rida   (Zip Code)  process for the above stated cost registered agent and agree to the proper and complete p	rporation	i at the pi	place
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Purpose(s) of Name and str Name: The Address: Registered ving been nationally the there agree to	eet address of Florida registered InCorp Services, Inc. 17888 67th Court North Loxahatchee (City) I agent's acceptance: amed as registered agent and to this application, I hereby accept to comply with the provisions of a	agent: (P.O. Box I	rried out in the state of Florida)  NOT acceptable)  rida   (Zip Code)  process for the above stated cost registered agent and agree to the proper and complete p	rporation o act in the erforman	at the place of my	olace city.

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  Chairman  Vice Chairman  Director  President  Vice President	Name: Address Chesteri	Michelle Brannon  1302 Wildhorse Meadows Dr.  lield, MO 63005	☐ Chairman  ☐ Vice Chairman  ☐ Director  ☐ President  ☐ Vice President  ☐ Secretary  ☐ Other:	Name: Address: St. Louis	David Taylor  2008 Victory Way Lane  i, MO 63138   ☐Treasurer  ☐Other:
□ Other: □ Chairman □ Vice Chairman	Name: Address:	Joshua Taylor 2008 Victory Way Lane	□Chairman □Vice Chairman	A Name:	ngel Jones 5866 Fountainview Dr
☐ Director ☐ President		, MO 63138	☐ President ☐ Vice President		
Secretary		☐ Treasurer	□Secretary □Other:		☐Treasurer ☐Other:
□Chairman □Vice Chairman □Director			□Chairman □Vice Chairman □Director □President □	Address:	
□President _ □Vice President _ □Secretary □Other:		☐ Treasurer	□Vice President □Secretary □Other:		□Treasurer
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)  Michelle Brannon, Secretary  (Typed or printed name and capacity of person signing application)					

# STATE OF MISSOURI



### John R. Ashcroft Secretary of State

### CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

The Kingdom of God Global Church N000700663

was created under the laws of this State on the 12th day of January, 2016, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hercunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 11th day of March, 2022.

Secretary of State

Certification Number: CERT-03112022-0093

