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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

: (323)389-0502 Fax Number

**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 DARICE JORDAN MINISTRIES, INC.

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

S.	FRANKLIN
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COVER LETTER

TO:	Registration Section Division of Corporations	
SHRI	ECT: DARICE JORDAN MINISTRIES. INC.	
SODO	Name of Corporation – must include suffix	
Dear S	ir or Madam:	
Affair	closed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to r the above referenced not for profit corporation to conduct its affairs in Florida.	
Please	return all correspondence concerning this matter to the following:	
	Cheyenne Moseley Name of Person Legalzoom.com, Inc.	
	Name of Person	
	Legalzoom.com, Inc.	
Firm/Company		
	<u></u>	
	101 N Brand Blvd 10th Floor	
	Address	
	Glendale, CA 91203	
	City/State and Zip Code	
	prophetessdaricejordan@gmail.com	
	E-mail address: (to be used for future annual report notification)	
For fur	ther information concerning this matter, please call:	
Cheye	nne Moseley 800 773-0888 at ()	
	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 Please	ed is a check for the following amount: nake check payable to: FLORIDA DEPARTMENT OF STATE	

■\$78.75 Filing Fee &

□ \$87.50 Filing Fee.

□ \$70.00 Filing Fee □\$78.75 Filing Fee &

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:

- 1 e-	** 1 1 1 1 1 1		
	·	ame adopted for the purpose of transacting business	
New York		3, 85-3053003 (FEI number, if applicable)	
00/11/20/20	•	•	
(Date of Incorporation) 5. (Date of duration, if other than per			tual)
08/02/2022			~-
(Date first con	ducted affairs in Florida if prior to registration. 5	See sections 617.1501 & 617.1302, F.S. to determine p	renaliy (iabi
			10
	Park Blvd., Apt #1412, Orlando, Florida 3282 (Principal o	office street address)	١
			Q,
			7
	(Current mail)	on address it different)	
	(Current maili	ng address, if different)	0.10
Coursel share	,	,	P 110: 2
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General char (Purpose(s) o	,	ng address, if different) Its through fundraisers to support local communities Iry to be carried out in the state of Florida)	1 10: 26 s in need 26
	,	nts through fundraisers to support local communities try to be carried out in the state of Florida)	1 [O: 26
Name and st	itable purpose / Hosting local community ever f corporation authorized in home state or coun treet address of Florida registered agent: (1	nts through fundraisers to support local communities try to be carried out in the state of Florida)	in needs
Name and st	itable purpose / Hosting local community ever f corporation authorized in home state or coun treet address of Florida registered agent: (1	nts through fundraisers to support local communities try to be carried out in the state of Florida)	in need 3
. Name and <u>st</u> Name:	itable purpose / Hosting local community ever Feorparation authorized in home state or countreet address of Florida registered agent: (I United States Corporation Agents, Inc. 5575 S. Semoran Blvd., Suite 36	nts through fundraisers to support local communities try to be carried out in the state of Florida) P.O. Box NOT acceptable)	in need 3
. Name and <u>st</u> Name:	itable purpose / Hosting local community ever Feorparation authorized in home state or countreet address of Florida registered agent: (I United States Corporation Agents, Inc. 5575 S. Semoran Blvd., Suite 36	nts through fundraisers to support local communities try to be carried out in the state of Florida)	TO:

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Cheyenne Moseley, Assistant Secretary on behalf of United States Corporation Agents, Inc.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to

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

A. DIRECTOR	Darice Jordan				
DCbaimus	Name: 7914 Inhilee Park Blvd., Ap. #1412 Address:	OChauman Chi		والمساور والمساور والمساورة والمساورة والمساورة والمساورة	
OVice Chairman	Orlando, Florida 32822	□Vice Chairman			
■ Director		ODirector			
BPresident		□President		<u> </u>	
OVice President		□Vice President			and the second of the second o
■ Secretary	Treasure:	DSecretary		☐Treasurer	
□Other:	Other:	□ Other:		Other:	
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	DVice Chairman	Address:	·····	<u> </u>
Director		DDirector			(7)
□President		□President			<u></u>
Vice Presiders		□Vice Presidem			_
D Secratory	ПТесамие	DSecretary		OTreasurer	110
□Other:	Other:	C) Other	~ ~~~	Other	
□Chaimus	Name:	□Chairman	Nanc:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director	the description and whole her high is a summary described and the summary and management and male and management	Director			
□President		D President	which a restrict participation of the	MAN 4	·
□Vice President		□Vice President	مة در مسجود و والدر ما حالت المحالت ال		
D Secretary	□Treasurer	□ Secretary		Treasurer	
DOther:	Other:	□ Other:	The sale of the sa	Other:	
Non-indexed irdiv	i Notice: Use an attachment to report more than sividuals may be added to the index when filling you (Signature of Chairman, Vice Chairman, or any on. President (Typed or printed name and capacity of	ir Florida Depuriment	of State Anima	d Report form.	poses only.

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: DARICE JORDAN MINISTRIES, INC.

DOS 1D Number: 5833245

Entity Type: DOMESTIC NOT-FOR-PROFIT CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 09/11/2020

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-9 PH 10: 25

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on August 04, 2022 at 07:44 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon Co Higher

By Brendan C. Hughes

Executive Deputy Secretary of State