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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 1, 2023

RT. REV. JOHN (SEAN) M. WALSH 506 N.E. 10TH AVENUE POMPANO BEACH, FL 33060-6436

SUBJECT: INTERNATIONAL CATHOLIC APOSTOLIC VICARIATE OF THE

GOOD SHEPHERD, INC. Ref. Number: W23000063095

We have received your document for INTERNATIONAL CATHOLIC APOSTOLIC VICARIATE OF THE GOOD SHEPHERD, 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):

According to section 607.1503 OR 617.1503, Florida Statutes, the application for Certificate of Authority must be made on the forms prescribed and furnished by the Department of State. Therefore, your application is being returned and the correct form is enclosed.

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) 245-6053.

Letter Number: 123A00009740

Yvette Scott Supervisor

COVER LETTER

SUBJECT: ALSO DBA THE ARAMAIC RITE CATHOLIC CHURCH, INC.

Name of Corporation - must include suffix

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to

THE INTERATIONAL CATHOLIC VICARIATE OF THE GOOD SHEPHERD, INC.

TO: Registration Section

Dear Sir or Madam:

Division of Corporations

_	rrespondence concerning this matter to the following:
<u></u> R	T, REV. JOHN (SEAN) M. WALSH Name of Person E INTERNATIONAL CATHOLIC VICARIATE OF THE GOOD SHEPHERD, INC
	BA THE ARAHAIC RITE CATHOLIC CHURCH, INC. Finn/Company
<u>5</u>	,
<u>5</u>	OF N.E. 10th AVENUE Address
<u></u>	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
	tion concerning this matter, please call:
JoHA (SEAN,	me of Person at (754) 317-2831 Area Code Daytime Telephone Number
Mailing Add Registration of	
P.O. Box	The Centre of Tallahassee ee, FL 32314 2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303 Tallahassee, FL 32303
☐ \$70.00 Filing Fo	
S. I MY LEG? MY RELIG	TOUS NAME IS ARCHBISHOP SEAN M. WALSH,

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:

THE STATE OF FLORIDA:

THE GOOD SHEPHERD, INC. (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.) (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. NEW HAMPSHIRE

(State or country under the law of which it is incorporated)

4. 09-18-1990

(Date of Incorporation)

5. PERPETUAL

(Date of duration, if other than perpetual) 6. HAS NOT CONDUCTED AFFAIRS IN FL PRIOR TO REGISTRATION (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.) 7. 506 N.E. 1044 AVENUE PAMPANO BEACH, FL 33060-6436 (Principal office street address) (Current maning acc.

8. EVANGELIZATION, CHURCH PLANTING, RELIGIOUS AND EDUCATION SERVICES, A
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: RT, REV. JOHN (SEAN) M. WALSH

Office Address: 506 N.E. 10th AVENUE

TO GACH

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TO GIO Code)

F. Florida 33060-6436 OND RELATED WORKS OF HERCY Name: RT, REV. JOHN (SEAN) M. WALSH

Office Address: 506 N.E. 10th AVENUE

POMPANO BEACH , Florida 33060-6436

(City) , Florida (Zip Code) 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

Registered agent's signature)

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.

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	S		
□Chairman	Name: WILLIAM J. MAUSEAU	□Chairman	Name: JOHN (SEAN) M. WALSH
□Vice Chairman	Address: 154 BROAD ST.	□Vice Chairman	Address: 506 N.E. 10th AVE.
Director	(SUITE 1539)	₩Director	POMPANA BEACH, FL 33060
☑President	NASHUA, NH 03063	□President	
□Vice President		☑ Vice President	
☐Secretary	□Treasurer	☐ Secretary	□Treasurer
Other:	Other:	□Other:	Other:
□Chairman	Name: JULIEN OLIVIER	□Chairman	Name: EMMA D. WALSH
□Vice Chairman	Address: 254 BENUTY HILL RD.	□Vice Chairman	Address: 506 N.E. 10th AVENUE
Director	BARRINGTON, NH 03825	Director	POMPANO BEACH F. 23060
□President		□President	
□Vice President		□Vice President	
☐ Secretary	Treasurer	☐ Secretary	Treasurer
Other:	☐ Other:	□Other:	Other:
□Chairman	Name: JANE OLIVIER	□Chairman	Name:
□Vice Chairman	Address: 254 BEAUTY HILL RD.	□Vice Chairman	Address:
⊠ Director	BARRINGTON, NH 03825	□Director	
□President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other:	☐ Other:	Other:	Other:
Non-indexed indi	Notice: Use an attachment to report more than six viduals may be added to the index when filing your when filing your when filing your when the six when filing your when filing	r Florida Department	of State Annual Report form.

State of New Hampshire Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that THE INTERNATIONAL CATHOLIC APOSTOLIC VICARIATE OF THE GOOD SHEPHERD is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on September 18, 1990. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 172969

Certificate Number: 0006197403



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 5th day of April A.D. 2023.

David M. Scanlan Secretary of State