F23000	024080
(Requestor's Name) (Address) (Address)	300411276603
(City/State/Zip/Phone #)	06/28/2301026002 **70.00
Special Instructions to Filing Officer:	FILED 2023 JUN 28 ANTI: 58 SECRETARY OF STATE TALL ANY STATE TALL ANY STATE

COVER LETTER

TO:	Registration Section	
	Division of Corporations	

SUBJECT: Miracles Unlimited. Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

.

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida." "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

J	Mills	Miracle

	Name	of Person	
Miracles Unlimited, Inc.			
	Firm/C	Company	
5568 Woodbine Road #450			
	Ac	idress	··· ••
Pace, Florida 32571			
	City/Stat	e and Zip code	
mui8080@comcast.net			
	E-mail address: (to be us	ed for future annual report	notification)
For further information cor	ncerning this matter, pleas	se call:	
J Mills Miracle	831 at () 818-5339	
Name of Person	Area C	Code Daytime Telep	bhone Number
STREET/COURI Registration Section Division of Corport The Centre of Tall 2415 N. Monroe S Tallahassee, FL 32	n ations ahassee treet, Suite 810	MAILING A Registration S Division of C P.O. Box 632 Tallahassee.	Section Corporations 17
Enclosed is a check for the Please make check payable to	: FLORIDA DEPARTME	NT OF STATE	
■ \$70.00 Filing Fee □	378.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee. Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503. FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Miracles Unlimi		
(If name unavaila	ble in Florida, enter alternate corporate name ado	opted for the purpose of transacting business in Florida)
California	3	(FEI number, if applicable)
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)
6/20/2000	5	
(Date	of incorporation)	(Date of duration, if other than perpetual)
		lorido if arianta registration)
	(Date first transacted business in F	
	(SEE SECTIONS 607.1501 & 607.1502	
2635 Tunnel Roa	(SEE SECTIONS 607.1501 & 607.1502 d. Pace, Florida 32571	, F.S., to determine penalty liability)
	(SEE SECTIONS 607.1501 & 607.1502 d. Pace, Florida 32571 (Principal office	street address)
	(SEE SECTIONS 607.1501 & 607.1502 d. Pace, Florida 32571 (Principal office Road #450, Pace, Florida 32571	street address)
	(SEE SECTIONS 607.1501 & 607.1502 d. Pace, Florida 32571 (Principal office Road #450, Pace, Florida 32571	street address)
5568 Woodbine	(SEE SECTIONS 607.1501 & 607.1502 d, Pace, Florida 32571 (Principal office Road #450, Pace, Florida 32571 (Current mailing a	street address)
5568 Woodbine	(SEE SECTIONS 607.1501 & 607.1502 d. Pace, Florida 32571 (Principal office Road #450, Pace, Florida 32571	street address)
5568 Woodbine	(SEE SECTIONS 607.1501 & 607.1502 d, Pace, Florida 32571 (Principal office Road #450, Pace, Florida 32571 (Current mailing a	street address)
5568 Woodbine	(SEE SECTIONS 607.1501 & 607.1502 d. Pace, Florida 32571 (Principal office Road #450, Pace, Florida 32571 (Current mailing a et address of Florida registered agent: (P.O. H J Mills Miracle	street address)
5568 Woodbine Name and <u>stree</u> Name:	(SEE SECTIONS 607.1501 & 607.1502 d. Pace, Florida 32571 (Principal office Road #450, Pace, Florida 32571 (Current mailing a et address of Florida registered agent: (P.O. F	street address)
5568 Woodbine	(SEE SECTIONS 607.1501 & 607.1502 d. Pace, Florida 32571 (Principal office Road #450, Pace, Florida 32571 (Current mailing a et address of Florida registered agent: (P.O. H J Mills Miracle	street address)

9. 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.

J. Mills Miracle	t	
(F	tegistered agent's signatu	иге)

10. 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.

A. DIRECTORS

· · · ·

Chairman	J Mills Miracle Name:	Chairman	Jeannie Miracle
□Vice Chairman	5568 Woodbine Road #450	□Vice Chairman	5568 Woodbine Road #450 Address:
	Pace, Florida 32571		Pace, Florida 32571
President		OPresident	
□Vice President		Vice President	
Secretary	Treasurer		Treasurer
□Other		□Other	
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director		Director	·
□President		President	
□Vice President		□Vice President	
Secretary	Treasurer	Secretary	
□Other	Other	Other	Other
Chairman	Name:		Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director		Director	
President			
□Vice President		□ Vice President	
	□Treasurer		Treasurer
DOther		Other	Other
individuals may be	Use an attachment to report more than six (6). Th added to the index when filing your Florida Dep	artment of State Annual Re	f for reporting purposes only. Non-indexed port form.
12J. Mill	s Miracle Signature of Dire	ctor or Officer	······
The officer or direc she is aware that fa s.817.155, F.S.	ctor signing this document (and who is listed in n lse information submitted in a document to the D	umber 11 above) aftirms the	at the facts stated herein are true and that he or tes a third degree felony as provided for in
13	J. (Typed or printed name and capacity of	Mills Miracle, President	
	(Typed or printed name and capacity of	person signing application))

I capacity of perso (Typed or printed



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: Entity No.: Registration Date: Entity Type: Formed In: Status:

MIRACLES UNLIMITED INC. 2052359 06/20/2000 Stock Corporation - CA - General CALIFORNIA Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 21, 2023.

SHIRLEY N. WEBER, PH.D. Secretary of State

Certificate No.: 122385729

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.