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COVER LETTER

то:	Registration Section Division of Corporations
SHRI	ECT: The Alliance of Divine Love, Incorporated
30 23	Name of Corporation – must include suffix
Dear S	Sir or Madam:
Affairs	iclosed "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:
	Rev Lindsay F Babieli
	Name of Person
	The Alliance of Divine Love, Incorporated
	Firm/Company
	956 Bear Island Circle
	Address
	West Palm Beach, FL 33409
	City/State and Zip Code
	adlnationalcomm@gmail.com
	E-mail address: (to be used for future annual report notification)
For fur	rther information concerning this matter, please call:
Rev I	indsay F Babich 561 596-2727
	Name of Person Area Code Daytime Telephone Number
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303
Please	is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE 0.00 Filing Fee \$\Bigsquare \text{\$\subsquare}\$78.75 Filing Fee & \$\Bigsquare \text{\$\subsquare}\$87.50 Filing Fee, Certificate of Status \$\text{\$\subsquare}\$ Certified Copy 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:

The Alliance of Divine Love, Incorporated

		ne adopted for the purpose of transacting busing	ness in Florida)
State of Geor	gia ntry under the law of which it is incorporated)	58-1283005	
August 24, 19	76 Date of Incorporation)	Perpetual	
(1)	Date of Incorporation)	(Date of duration, if other than p	erpetual)
July 3, 2024			
(Date first cond	ucted affairs in Florida if prior to registration. Se	e sections 617.1501 & 617.1502, F.S. to determ	iine penalty liabilit
950 Dear Islan	id Circle, West Palm Beach, FL 33409	fice street address)	
	(Finesparon	acc sites address)	
P.O. Box 117,	Saint Augustine, FL 32085		
	(Current mailing	g address, if different)	
Training and	Conney! Sarvivae of a Group Interfaith Ministr	v	
	vienciai ocivices or a virono interfatti vinusti		
(Purpose(s) of	General Services of a Group Interfaith Ministr corporation authorized in home state or countr	y to be carried out in the state of Florida)	
(Purpose(s) of	corporation authorized in home state or country	y to be carried out in the state of Florida)	C :
(Purpose(s) of	corporation authorized in home state or countreet address of Florida registered agent: (P.	y to be carried out in the state of Florida)	2024
(Purpose(s) of Name and str	corporation authorized in home state or countreet address of Florida registered agent: (P.	y to be carried out in the state of Florida) O. Box NOT acceptable)	2024 SE
(Purpose(s) of Name and str	corporation authorized in home state or countreet address of Florida registered agent: (P.	y to be carried out in the state of Florida) O. Box NOT acceptable)	2024 SEF
(Purpose(s) of Name and str	corporation authorized in home state or countreet address of Florida registered agent: (P.	y to be carried out in the state of Florida) O. Box NOT acceptable)	7024 SEF - 5
(Purpose(s) of Name and str	corporation authorized in home state or countreet address of Florida registered agent: (P.	y to be carried out in the state of Florida) O. Box NOT acceptable)	2024 SE17 - 5 PT
Purpose(s) of Name and str	corporation authorized in home state or countreet address of Florida registered agent: (P.	y to be carried out in the state of Florida) O. Box NOT acceptable)	2024 SEP - 5 PH 12
Purpose(s) of Name and str	corporation authorized in home state or countr	y to be carried out in the state of Florida) O. Box NOT acceptable)	2024 SET -5 PT 12 48

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. DIRECTORS Rev Barbara Rothwell Rev Sheridan Springer □ Chairman Name: □Chairman 951 Saddle Ridge 21338 Royal Troon Dr □Vice Chairman Address: □ Vice Chairman Address: Portage, WI 53901 Leesburg, FL34748 □Director Director ■President □President □ Vice President ■Vice President □ Secretary Treasurer □Treasurer □ Secretary □Cther: Other: □Other: □Other: Rev Estelle Thibodeau Rev Michael Tobolski Name: □Chairman □Chairman Name: 65 Lewis Blvd 12794 Roughton Dr. ☐Vice Chairman Address: □Vice Chairman Address: Saint Augustine, FL 32084 Mount Airy, MID 21771 □Director □Director □ President □President □Vice President □Vice President ■ Secretary □Treasurer □ Secretary ■Treasurer □Other: ☐ Other:____ □Other:_____ □Other:____ □Chairman Name: □ Chairman Name: _____ □Vice Chairman Address: ______ □Vice Chairman Address: ☐Director □Director □President □President □Vice President □ Vice President □ Secretary □Treasurer □ Secretary □Treasurer ☐ Other:____ □Other: □Other:___

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.

13. Across description of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

Rev Sheridan Springer, Vice President

Control Number: H700213

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

THE ALLIANCE OF DIVINE LOVE, INCORPORATED

a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

 Docket Number
 : 27842450

 Date Inc/Auth/Filed
 : 08/24/1976

 Jurisdiction
 : Georgia

 Print Date
 : 08/26/2024

 Form Number
 : 211



Brad Rafforgerger