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TALLAHASSEE, FLORIDA

JUL 16 2019

M. SOLOMON

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: ABWE Foundation, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JOSEPH D MASHARDT
Name of Person

ABWE Foundation, LLC
Firm/Company

522 LEWISBERRY ROAD
Address

NEW CUMBERLAND PA 17070
City/State and Zip Code

jmashardt@abwe.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH D MASHARDT at (717) 901-2427
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:
Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ $125.00 Filing Fee ☐ $130.00 Filing Fee & Certificate of Status ☐ $155.00 Filing Fee & Certified Copy ☐ $160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ABWE Foundation, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Pennsylvania
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 23-2913391
(FEI number, if applicable)

4. January 1, 2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0902 & 605.0905, F.S. to determine penalty, liability.)

5. 522 Lewisberry Road
(Street Address of Principal Office)

New Cumberland PA

17070

6. PO Box 8585
(Mailing Address)

Harrisburg PA 17105

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

Name: InCorp Services, Inc.

Office Address: 1733 67th Court North

Lauderhill, Florida 33470
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

Vanissa Moon Vanissa Moon on behalf of InCorp Services, Inc.
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
☒ Manager	Name: ASSOCIATED OF BAPTISTS FOR WORLD EVANGELISM, INC.	☐ Manager	Name: JOSEPH D. MAISHARDT
☒ Member	Address: 533 LEWISBERRY ROAD	☐ Member	Address: 533 LEWISBERRY ROAD
☐ Authorized	NEW CUMBERLAND	☒ Authorized	NEW CUMBERLAND PA
Person	PA 17070	Person	17070
☐ Other	☐ Other	☐ Other	☐ Other
☐ Manager	Name: LAURIE J. DINGELDEIN	☐ Manager	Name: SHARON F MARTIN
☐ Member	Address: 533 LEWISBERRY ROAD	☐ Member	Address: 533 LEWISBERRY ROAD
☒ Authorized	NEW CUMBERLAND	☒ Authorized	NEW CUMBERLAND PA
Person	PA 17070	Person	17070
☐ Other	☐ Other	☐ Other	☐ Other
☐ Manager	Name: PAUL DAVIS	☐ Manager	Name:
☐ Member	Address: 533 LEWISBERRY ROAD	☐ Member	Address:
☒ Authorized	NEW CUMBERLAND	☐ Authorized	
Person	PA 17070	Person	
☐ Other	☐ Other	☐ Other	☐ Other

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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

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

Joseph D. Maishardt
Signature of an authorized person

JOSEPH D. MAISHARDT
Typed or printed name of signee

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

04/30/2019

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

ABWE Foundation, LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Kathy Boockvar

Acting Secretary of the Commonwealth

Certification Number: TSC190430120952-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify