1110000111

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
CURRENT AND CLE 1, 1V
DOC EXAM. BS

Office Use Only



700212514457

09/26/11--01022--001 **78.75

SECRETARY OF STATE DIVISION OF CORPORATIONS

Ps 9/27/1/

New Beginning Revival Center



Christ Is Life All Over The World

August 22, 2011

Division of Corporations Attention: Certification P.O. Box 6327 Tallahassee, Florida 32314

To Whom It May Concern:

This letter is in regards to a <u>Certificate of Status</u>. New Beginning Revival Center now has a Food Bank to help feed the hungry. They require a letter to show we are still active. We purchase the food from Agape in Lakeland. However, Cahill Ministries Food Bank require a letter showing we are still active. In the conversation 8/22/11, I was told by Karen I need a Certificate of Status. I would appreciate your help so we will be able to purchase the food. I have the other two items from United Christian Church from Tennessee that they need.

I am enclosing several copies to give you information as to what is needed.

Cahill Ministries Food Bank 1333 N. Brunnell Pkwy. Lakeland, Florida 33805 (863) 682-3663 Requesting Certificate of Status.

New Beginning Revival Center 2102 K-Ville Avenue Auburndale, Florida 33823 (863) 965-1939 Fax: 967-8706

Pastor: Juanell Monday

Please advise me as to what I need to do. Please expedite if possible. The next Food Bank date is September 8th. August 4th we had over 117 people needing food. I was informed there is 8.75 due. I wanted to wait until I hear from you before sending a check.

Thank you very much for your help. I pray the information will help.

Juanell Monday - Pastor

Enclosures Kéville - Intersection Thornhill & K-Ville - P.O. Box 2089 - Auburndale, Florida 33823
Pastor: Rev. Juanell Monday - Assistant Pastor- Healing School - Anna Cuevas

(863) 965-1939

Hew Beginning Revival Center

Christ Is Life All Over The World

September 21, 2011

Department of State Division of Corporation P.O. Box 6327 Tallahassee, Florida 3231

To Whom It May Concern:

I am trying to get New Beginning Revival Center Registered with the state of Florida. This is the procedure I was told to follow. If it is not correct, please advise me.

I did not know The Monday Ministries had expired which was filed April 18, 2000. It is still on the list of Businesses at www.Sunbiz.org. I would like Monday Ministries to be the primary and New Beginning Revival Center second for fictitious name. If this is a problem, reverse the names.

PLEASE EXPEDITE!! Cahill Food Bank-1333 N. Brunnell Pkwy.-Lakeland, Florida, 33805 requires this information. We will be distributing the food for the homeless October 6th. I have all the other papers and will be waiting on this information.

I have enclosed other forms that may be of help. I would also like the forms to become a Corporation, IIT. I was told I needed this for the protection of the church. All this is new to me and I would appreciate any help and advice you can give me.

(863) 965-1939 Fax: (863) 967-8706

Enclosed Check No. 212 - dated 9/21/11 - in the amount of \$78.75 Filing & Status

Thanking you in advance:

Juanell Monday

Pastor

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

>]\$70.00 Filing Fee

SUBJECT: New Beginning Revival Center, Inc., (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

\$78.75

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

Status	& Certified Copy & Certified Copy & Certificate	
	ADDITIONAL COPY REQUIRED	
Name (Pri	Monday nted or typed)	
2575 Sun	n15e Terrace	
Auburndal City, s	e, Fl. 33823 tate & Zip	
<u>863-965-7</u> Daytime Tel	939 lephone number	
Mondouy Mini E-mail address; (to be used for fi	stries-Comila Hot MAIL	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

The name of the corp	NAME poration shall be: New Beginn	ing Revis	val Center, Inc.	
ARTICLE II	PRINCIPAL OFFICE	Centic Inc.	Mailing address, if different is	
The purpose for white less to be the feel of the feel	PURPOSE ich the corporation is organized is: A Chu cable to serciece the ed the homeless the nd lestanding chur MANNER OF ELECTION The manner in	ch.	rayer and Worshi through the Look ration to Show to	Chan we a
AS STA			••	
ARTICLE V Name and Title Address:	INITIAL OFFICERS AND/OR DIRECTO	Name and Title: Address:	Don Chumney Board member Lang Feader	~
Name and Title Address:	: Ricky Childy Board sprember Officer	Name and Title: Address:	duna Cuevas Secretary	
Name and Title Address:	e: Themeth Jestey Joand member Officer	Name and Title: Address:	Linder lester Treasurer	
The name and Flori Name: Address:	REGISTERED AGENT da street address (P.O. Box NOT acceptable) o JUGNELL Manday Luburn all, Fli 33 INCORPORATOR Ess of the Incorporator is: JUGNELL MANDAY JASJ S SLEENES & JUNG JUGNELL MANDAY JASJ S SLEENES & JUNG JUGNELL MANDAY JASJ S SLEENES & JUNG JUGNELL MANDAY JUGNELL MANDAY JASJ S SLEENES & JUNG JASJ S S SLEENES & JUNG JASJ S S S S S S S S S S S S S S S S S S	Tel	11.SEP 26 PM 4: 05	SECRETARY OF STATE DIVISION OF CORPORATIONS
I submit this docume to the Department of	as registered agent to accept service of procedural with and accept the appointment as register MMCAY Required Signature of Registered Agent and affirm that the facts stated herein are to State constitutes a third degree felony as provided that MMACAY	red agent and agree rue. I am aware tha led for in s.817.155,	e to act in this capacity J / J / / (Date at any false information submitted in a	-
to the Department of	ent and affirm that the facts stated herein are to State constitutes a third degree felony as provided the facts of Indorporator and the fact of Indorporator and	led for in s.817.155,	nt any false information submitted in a F.S. 9/2/// Date	docume