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COVER LETTER

TO:	O: Registration Section Division of Corporations					
CHDI	ECT: ONE LIGHT INC					
SUBJ	Name of Corporation – must include suffix					
Dear S	ir or Madam:					
Affairs	closed "Application by Foreign Not for Profit Corporation for Authoriza in Florida", "Certificate of Existence", or "Certificate of Status" and che r the above referenced not for profit corporation to conduct its affairs in I	eck are submitted to				
Please	return all correspondence concerning this matter to the following:					
	Rev. Derrick Vincent					
	Name of Person					
	ONE LIGHT INC					
	Firm/Company					
	2646 Treanor Ter					
	Address					
	Wellington, FL 33414					
	City/State and Zip Code					
	one_light1@outlook.com					
	E-mail address: (to be used for future annual report notifica	ntion)				
For fur	ther information concerning this matter, please call:					
Rev. D	Derrick Vincent 561 410-8963 at ()					
	Name of Person Area Code Daytime Tel	ephone Number				
	P.O. Box 6327 The Centre of Tallal Tallahassee, FL 32314 2415 N. Monroe Str					
Please	ed is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE .00 Filing Fee	■\$87.50 Filing Fee, Certificate of Status & 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:

(If name unav	ailable in Florida, enter alternate corpo	prate name adopted for the purpose of transacting business	in Florida)
			,
Connecticut		porated) (FEI number, if applicable)	
State or cou	ntry under the law of which it is incorp	porated) (FEI number, if applicable)	
07/25/2024		5. (Date of duration, if other than perpe	
(1	Date of Incorporation)	(Date of duration, if other than perpe	tual)
Date first conc	lucted affairs in Florida if prior to registr	ration. See sections 617.1501 & 617.1502, F.S. to determine	penaliy hability)
646 Treanor	Ter. Wellington FL 33414		
	(Prir	ncipal office street address)	*
	Curren	it mailing address, if different	
This Date are C		-	
		c1a Faith Based Organization and Private Ecclesiastic Res aus, spiritual, scientific, missionary, educational, spiritual/sci	
	mesa isi dilantasis, seneralant, tengia		
and social pur		ne Private Ecclesiastic domain and jurisdiction.	101111110 (0302) (31)
ind social pur		ne Private Ecclesiastic domain and jurisdiction. or country to be carried out in the state of Florida)	
and social purpose(s) of	corporation authorized in home state of	ne Private Ecclesiastic domain and jurisdiction. or country to be carried out in the state of Florida)	
ind social pur Purpose(s) of		ne Private Ecclesiastic domain and jurisdiction. or country to be carried out in the state of Florida)	
ind social pur Purpose(s) of Name and <u>sti</u>	corporation authorized in home state of ceet address of Florida registered ag	ne Private Ecclesiastic domain and jurisdiction. or country to be carried out in the state of Florida) gent: (P.O. Box NOT acceptable)	Zuza Alig
and social pur Purpose(s) of Name and <u>str</u> Name:	corporation authorized in home state of reet address of Florida registered ag	ne Private Ecclesiastic domain and jurisdiction. or country to be carried out in the state of Florida) gent; (P.O. Box <u>NOT</u> acceptable)	
and social pur Purpose(s) of Name and <u>str</u> Name:	corporation authorized in home state of reet address of Florida registered ag	ne Private Ecclesiastic domain and jurisdiction. or country to be carried out in the state of Florida) gent; (P.O. Box <u>NOT</u> acceptable)	2024 ATS -7
and social pur Purpose(s) of Name and <u>str</u> Name:	corporation authorized in home state of reet address of Florida registered ag Rev. Genevieve Allard 2646 Treanor Ter	ne Private Ecclesiastic domain and jurisdiction. or country to be carried out in the state of Florida) gent: (P.O. Box <u>NOT</u> acceptable)	Loza AUS - 7 PH
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Name and straight Name: Name Address Registered ving been no	corporation authorized in home state of reet address of Florida registered ag Rev. Genevieve Allard 2646 Treanor Ter Wellington (City) 1 agent's acceptance: umed as registered agent and to acceptance.	ne Private Ecclesiastic domain and jurisdiction. For country to be carried out in the state of Florida) gent: (P.O. Box NOT acceptable) , Florida 33414 (Zip Code) scept service of process for the above stated corporate	Local Miss - 7 PH below the place to at the place to the
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and social pur (Purpose(s) of Name and str Name: ffice Address 0. Registered aving been no exignated in the rther agree to and I am famil	Rev Genevieve Allard 2646 Treanor Ter Wellington (City) I agent's acceptance: med as registered agent and to achis application, I hereby accept the ocomply with the provisions of all iar with and accept the obligations. (Rev Genevieve Allard (City) I agent's acceptance: med as registered agent and to achis application, I hereby accept the obligations. (Rev Genevieve Allard (City)	private Ecclesiastic domain and jurisdiction. For country to be carried out in the state of Florida) gent: (P.O. Box NOT acceptable) Florida 33414 (Zip Code) Scept service of process for the above stated corporate appointment as registered agent and agree to act in statutes relative to the proper and complete performs of my position as registered agent.	tion at the place of my distance of my distance of my distance.

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			
□Chairman	Name: Rev. Derrick Vincent	□Chairman	Name: Rev. Genevieve Allard
□Vice Chairman	Address:	□Vice Chairman	Address: 2646 Treanor Ter
Director	Wellington, FL 33414	■ Director	Wellington, FL 33414
President		■ President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	□Secretary	□Treasurer
■Other: CEO	☐ Other:	⊕Other:	Other:
□ Chairman	Rev. Jonathan Kavner	□ Chairman	Name:
□ Vice Chairman	Address: 16 Railroad Pl #1075	□Vice Chairman	Address:
□ Director	Westport, CT 06880	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	Other:
Non-indexed indiv	(Signature of Chairman, Vice Chairman or any off Vincent, CEO/President	Florida Department of the control of	of State Annual Report form. 12 of the application)
	(Typed or printed name and capacity of no	reon ciunina applicat	ionl

Secretary of the State of Connecticut Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: Saturday, July 27, 2024 11:22 PM

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of incorporation for the below domestic Non-Stock corporation was filed in this office.

A certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far, as indicated by the records of this office, such corporation is in existence.

Business Details

Business Name	One Light Inc	
Business ALEI	US-CT.BER:3044040	
Formation Date	07/25/2024	

Secretary of the State

Business ALEI: US-CT.BER:3044040

Note: To verify this certificate, visit Business.ct.gov

Page 1 of 1

Certificate Number: C-00137907