

F25000042873

Florida Department of State
Division of Corporations
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**FOREIGN PROFIT/NONPROFIT CORPORATION
THE TRAVELING PASTOR INC.**

Certificate of Status	0
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APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1505, 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

1. THE TRAVELING PASTOR INC.

(Name of corporation must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so continued in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida.)

2. Delaware 93-4543954
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/16/2023 5. Perpetual
(Date of Incorporation) (Date of duration, if other than perpetual)

6. Upon Filing
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)

7. 440 Pigeon View Lane, New Castle, Delaware 19720
(Principal office street address)

(Current mailing address, if different)

8. Public charity or private foundation.

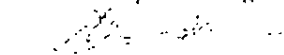
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

Name: Business Filings Incorporated
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip Code)

10. 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.



Chris Das, AVP, Business Filings Incorporated

(Registered agent's signature)

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.

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12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

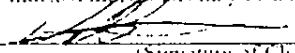
A. DIRECTORS

☐ Chairman	Name	Walter E. Smith	☐ Chairman	Name	Sharon G. Smith
☐ Vice Chairman	Address	1384 Inverness St.	☐ Vice Chairman	Address	1384 Inverness St.
☐ Director		Port Charlotte, Florida 33952	☐ Director		Port Charlotte, Florida 33952
☒ President			☐ President		
☐ Vice President			☒ Vice President		
☐ Secretary		☐ Treasurer	☐ Secretary		☐ Treasurer
☐ Other		☐ Other	☐ Other		☐ Other

☐ Chairman	Name	Mobrie Lawson	☐ Chairman	Name	Glenn Sterrett
☐ Vice Chairman	Address	1384 Inverness St.	☐ Vice Chairman	Address	128 Nanti St.
☒ Director		Port Charlotte, Florida 33952	☒ Director		Park Forest, Illinois 60466
☐ 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

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be indexed for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Walter E. Smith, President
(Typed or printed name and capacity of person signing application)

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STATE

Delaware

The First State

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I, CHARUNI P. SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THE TRAVELING PASTOR INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTY-FIRST DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



2641684 8300C

SR# 20250336260

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, reading "C. P. Sanchez".

Charuni P. Sanchez, Secretary of State

Authentication: 202829412

Date: 01-31-25