



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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 R.I. DEPT. OF STATE
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Certificate of Authority

FOREIGN Non-Profit Corporation

2020 SEP 22 AM 11:24

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-6-74, the undersigned foreign non-profit corporation hereby applies for a Certificate of Authority to conduct affairs in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is:		
Ministerio Iglesia Cristo Misionera Libre Inc.		
1a. The name, if different, which it elects to use in Rhode Island is:		
*If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application.		
2. It is incorporated under the laws of:		
Puerto Rico		
3. The date of its incorporation is:		
July 17, 2002		
And the period of its duration is: CHECK ONLY ONE BOX		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
4. The address of its principal place of business is:		
245 Manton St., #24, Pawtucket RI 02861		
5. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name Santo Mojica		
Street Address (NOT a P.O. Box) 245 Manton St. #34		
City/Town	State	Zip Code
Pawtucket	RHODE ISLAND	02861

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov**FILED****SEP 22 2020**
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6. The purpose or purposes which it proposes to pursue in the conducting its affairs in Rhode Island:

To operate a Mission to serve people in the Christian Community, to follow the Teachings of Jesus Christ, the directions of the Holy Spirit and to keep intact the Doctrine of the Holy Bible.

Check the box to indicate an attachment ☐

7. The names and respective addresses of its directors and officers are:

OFFICE	NAME	ADDRESS
Director	Santo Mojica	245 Manton St. #24, Pawtucket RI 02861
Director	Julie Mojica	245 Manton St. #24, Pawtucket RI 02861
Director	Migdalia Gaytan	258 Randall St., Pawtucket RI 02860
President	Santo Mojica	245 Manton St. #24, Pawtucket RI 02861
Vice President	Martin Martinez	525 2nd St. #4, Woonsocket RI 02895
Treasurer	Edgardo Santiago	126 Burnside Ave. Woonsocket RI 02895
Secretary	Maria Acosta	126 Burnside Ave. Woonsocket RI 02895

Check the box to indicate an attachment ☐

8. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing.

Under penalty of perjury, we declare and affirm that we have examined this Application for Certificate of Authority, including and accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of ☒ President OR ☐ Vice President

Santo Mojica

Date

8/18/2020

Signature of President OR Vice President

Santo Mojica

Type or Print Name of ☒ Secretary OR ☐ Assistant Secretary

Maria Acosta

Date

8/18/2020

Signature of Secretary OR Assistant Secretary

Maria Acosta



Government of Puerto Rico

CERTIFICATE OF EXISTENCE

I, **Elmer L. Roman, Secretary of State** of the Government of Puerto Rico,

CERTIFY: That, **MINISTERIO IGLESIA CRISTO MISIONERA LIBRE INC.**, registry number **39627**, is a religious nonprofit corporation organized on **July 17, 2002**.

Religious nonprofit Corporations do not file annual reports according to the General Corporations Law, as amended. A Certificate of Good Standing cannot be issued for this type of entity.



IN WITNESS WHEREOF, the undersigned by virtue of the authority vested by law, hereby issues this certificate and affixes the Great Seal of the Government of Puerto Rico, in the City of San Juan, Puerto Rico, today, **July 20, 2020**.

A handwritten signature in black ink, appearing to read "Elmer L. Roman".

Elmer L. Roman
Secretary of State

To validate this certificate go to:

<http://estado.pr.gov/>

This certificate can be validated an unlimited number of times before its expiration date of 20-Jul-2021.

Certificate Validation Number: **354675-73203001**



State of Rhode Island

Department of State | Office of the Secretary of State

Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

September 22, 2020 11:24 AM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

