

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

Section 1

1. The Queendom of Jesus Paul Messiah, Inc.
 Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

1 Central Park West Unit # 34-A c/o Janet Jackson
 Mailing Address of Business
New York New York 10023
 City State Zip Code

3. Florida County of principal place of business: Highlands

923 South A Avenue, Avon Park, FL. 33825
 (see instructions if more than one county)

FEI Number: 27-1151849

This space for office use only

Section 2

A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):

1. _____ Last First M.I.	2. _____ Last First M.I.
_____ Address	_____ Address
_____ City State Zip Code	_____ City State Zip Code

B. Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary):

1. <u>The National Community Network, Inc</u> Entity Name <u>923 South A Avenue</u> Address <u>Avon Park</u> <u>Florida</u> <u>33825</u> City State Zip Code <u>Florida Document Number N09000010173</u> FEI Number: <u>27-1151849</u> <input type="checkbox"/> Applied for <input checked="" type="checkbox"/> Not Applicable	2. _____ Entity Name _____ Address _____ City State Zip Code Florida Document Number _____ FEI Number: _____ <input type="checkbox"/> Applied for <input type="checkbox"/> Not Applicable
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Section 3

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 865.09, F.S., I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the signature below shall have the same legal effect as if made under oath and I am aware that 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.

[Signature] 26 Dec. 2015 Revjpmessiah@TheNationalCommunityNetwork.org
 Signature of Owner in Section 1 Date E-mail address: (to be used for future renewal notification)

Phone Number: (917) 701-9427

Section 4

**FOR CANCELLATION COMPLETE SECTION 4 ONLY:
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:**

I (we) the undersigned, hereby cancel the fictitious name _____
_____, which was registered on _____ and was assigned
registration number _____

Signature of Owner of Registration being Cancelled Date Signature of Owner of Registration being Cancelled Date

Mark the applicable boxes Certificate of Status — \$10 Certified Copy — \$30
NON-REFUNDABLE PROCESSING FEE: \$50