AZ Corp. Commission
04017745

OCT 1 6 2012

FILE NO. 1790158:3

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

## ARTICLES OF INCORPORATION NONPROFIT CORPORATION

Read the Instructions CO11i

•	oration: a Glow Ministries, Inc.							
CHARACTER OF AFFAIRS - briefly describe the character of affairs the corporation initially intend to conduct in Arizona. NOTE that the character of affairs that the corporation ultimately conducts not limited by the description provided. $for$								
Pro	ceeds from retail store pr	ovide financial support rel	igious Christian	based organizations.				
MEI	MBERS – check one:	☐ The corporation WI	⊥ have memb	ers.				
		■ The corporation WI	LL NOT have m	nembers.				
		OF BUSINESS ADDRES		ska akunan adalah an as as kha				
ARI 4.1	Is the Arizona known statutory agent?	place of business addres	s the same as t	the <b>street address</b> of the				
	Is the Arizona known statutory agent?		s the same as t	the <b>street address</b> of the				
	Is the Arizona known statutory agent?	place of business addres  Yes – go to number 5 ar  No – go to number 4.2	s the same as to and continue and continue physical or s	street address (not a P.O.				
4.1	Is the Arizona known statutory agent?  If you answered "No Box) of the known p  Shirley Madkins  Attention (optional)	place of business addres Yes – go to number 5 ar No – go to number 4.2 " to number 4.1, give the lace of business of the co	s the same as to and continue and continue physical or s	street address (not a P.O.				
4.1	Is the Arizona known statutory agent?  If you answered "No Box) of the known p  Shirley Madkins	place of business addres Yes – go to number 5 ar No – go to number 4.2 " to number 4.1, give the lace of business of the co	s the same as to and continue and continue physical or s	street address (not a P.O.				
4.1	Is the Arizona known statutory agent?  If you answered "No Box) of the known p  Shirley Madkins  Attention (optional) 15305 W. McDowel	place of business addres Yes – go to number 5 ar No – go to number 4.2 " to number 4.1, give the lace of business of the co	s the same as to and continue and continue physical or s rporation in Ari	street address (not a P.O. zona:				
4.1	Is the Arizona known statutory agent?  If you answered "No Box) of the known p  Shirley Madkins  Attention (optional) 15305 W. McDowel Address 1	place of business addres Yes – go to number 5 ar No – go to number 4.2 " to number 4.1, give the lace of business of the co	s the same as to and continue and continue physical or s	street address (not a P.O.				

соп	tECTORS - list the poration. If more spectrument form C082.	oace is nee					
Shirley	Madkins			Lawre	nce Madkins Jr.		
Martie 13225 V	V. Junipero Dr.			Name 13225	W. Junipero Dr.		
Address 1				Address I		· · ·	
Address 2 (or Sun City	•	AZ	85375		(optional) ity West	AZ	85375
City Country	UNITED STATES	State or Province	Žip .	City Country	UNITED STATES	State or Province	Z40
Sherry (	Caires	··· <del>-</del> ·		Erik R	Lichards		
12614 N	l. 62nd Drive			22600	W. Papago St.		
Address 1				Address 1			
Address 2 (o Glendal		AZ	85304	Address 2 Bucke	(optional) 'ye	AZ	85326
City Country	UNITED STATES	State or Province	Zip	City	UNITED STATES	State or Province	Žlp
Name				Name			
Address 1				Address 1			
Address 2 (o	ptional)			Address 2	(optional)		
City		State or Province	Zip	City		State or Province	Žip
COUNTY	t			LOGINY	<u></u>		

6. STAT	UTORY AGEN	IT – <u>see</u>	Instructions C01	<u>Li</u>			
6.1	REQUIRED - q an individual or a or street addre of the statutory a	an entity) a es (not a P		6.2		– mailing addr gent (can be a l	
Lawrence	Madkins, Jr						
Statutory Agent	Name (required)			1			
Attention (optio				Attention (option	nel)		
Address 1	Junipero Dr.	<del></del>		Address 1			
Address 2 (optic	nal)	AZ	185375	Address 2 (opti	onal)		1
CRy Sun C	ity West	State	Zip	City		State	Zip
6.3	REQUIRED - I		tory Agent Accep	tance form	M002 must	be submitte	d along with

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## STATUTORY AGENT ACCEPTANCE

Please read Instructions MOO2i

			a instructions <u>Mod2i</u>						
1.	<b>ENTITY NAME</b> – give the exact name in Arizona of the corporation or LLC that has appointed the Statutory Agent:								
	SON GLOW MINISTRII	ES, INC.							
2.	A.C.C. FILE NUMBER (Find the A.C.C. file number on the		ted or registered in AZ): OR on our website at: http://www.azco	c.gov/Divisions/Corporations					
3.			name of the Statutory Agent Ther an individual or an entit						
	Lawrence H. Madkins, Jr	Lawrence H. Madkins, Jr.							
	3.1 Check one box		agent is an <b>Individual</b> (na agent is an <b>Entity</b> .	tural person).					
ST	ATUTORY AGENT SIGNA	ATURE:							
	accepts the appointment	as statutory agent for pointment is effective	al or entity named in numbe the entity named in numbe until the entity replaces the irst.	r 1 above, and					
			I acknowledge <i>under penalt</i> omitted in compliance with <i>l</i>						
	<i>y.</i> •	<b>☑</b> I A0	CCEPT						
	1 / /	Λ							
\ X	Laurence H Walken	nf). Lawi	rence H. Madkins, jr.	10-15-12					
) 9/9 RE	Quirence A Madking  QUIRED - check only one	Printed		10 - 15 - 12 Date					

Filing Fee: none (regular processing)	Mail:	Arizona Corporation Commission - Corporate Filings Section
Expedited processing – add \$35.00 to filing fee.		1300 W. Washington St., Phoenix, Arizona 85007
All fees are nonrefundable - see Instructions.	Fax:	602-542-4100

Please be advised that A.C.C. forms reflect only the **minimum** provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are **public record** and are open for public inspection.

If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

7.	INCORPORATORS - incorporator - minimu ☐ and complete and a	m of or	e is required. If	more sp	ace is needed, chec		
Shirl	ey Madkins			Lawre	ce Madkins Jr.		
Name	5 W. Junipero Dr.			Name	W. Junipero Dr.		
Sun	s 2 (aptional) City West	AZ	85375	Address 2 Sun Cit	• • • •	AZ	85375
City	UNITED STATES	State	Zip	City	UNITED STATES	State	Zip
ackr docu subr	hecking the box marked "I nowledge under penalty of unent together with any and intend in compliance with I according to the large of t	perjury ttachme Arizona I EPT	that this nts is	acknow docum submit	cking the box marked viedge under penalty of ent together with any ted in compliance with a compliance	of perjury attachmen Arizona	that this ents is law.
	ed Name SNING FOR AN ENTITY, CHECK		Date	Printed I	lome ING FOR AN ENTITY, CHE	CK ONE. FI	Date
	Corporation as Incorporation officer or authorized agent name is:	i <b>tor -</b> I a	m signing as an	Ø	Corporation as Incorporation as Incorpor	orator - 1	am signing as an
	Son Glow Ministries, In	c.		s	on Glow Ministries,	Inc.	
	LLC as Incorporator - 1 a manager, or authorized age company , and its name is	ent of a N			LLC as Incorporator - I manager, or authorized a company , and its name	gent of a l	
				_			

Filing Fee: \$40.00 (regular processing) Expedited processing – add \$35.00 to filing fee. All fees are nonrefundable – see Instructions. Mail: Arizona Corporation Commission

Corporate Filings Section

1300 W. Washington St., Phoenix, Arizona 85007

Fax: 602-542-4100

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## **CERTIFICATE OF DISCLOSURE**

Read the Instructions C003i

1.	ENTITY NAME - give the exact name of the corporation in Arizona:								
	Son G	low Ministries, Inc							
2.		FILE NUMBER (if already incorporated or registered in AZ):	.gov/Divisions/Co	rporations					
3.	Check	only one of the following to indicate the type of Certificate:							
		Initial (accompanies formation or registration documents)							
		Annual (credit unions and loan companies only)							
		Supplemental to COD filed (supplements a previo	usly-filed						
		Certificate of Disclosure)							
4.	FELON	Y/JUDGMENT QUESTIONS:							
	contro	ly person (a) who is currently an officer, director, trustee, or incorporate or holds over ten per cent of the issued and outstanding common	shares or te	en per					
		f any other proprietary, beneficial or membership interest in the cor	poration bee	:n:					
	4.1	Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the seven year period immediately preceding the signing of this certificate?	Yes	■ No					
	4.2	Convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the seven-year period immediately preceding the signing of this certificate?	☐ Yes	■ No					
	4.3	Subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the seven-year period immediately preceding the signing of this certificate, involving any of the following:							
-		<ul> <li>a. The violation of fraud or registration provisions of the securities laws of that jurisdiction;</li> <li>b. The violation of the consumer fraud laws of that jurisdiction;</li> <li>c. The violation of the antitrust or restraint of trade laws of that jurisdiction?</li> </ul>	☐ Yes	■ No					
	4.4	If any of the answers to numbers 4.1, 4.2, or 4.3 are YES, you MU and attach a Certificate of Disclosure Felony/Judgment Attachmen							

5. BANKRUPTCY QUES	TION:						
5.1 Has any person incorporator, the issued and any other pro- corporation, si cent interest in Certificate) or corporation	nt of nt of ne	☐ Yes	■ No				
5.2 If the answer of Disclosure Bar				complete and	attach a	Certificat	te of
IMPORTANT: If within to Certificate becomes an officer, outstanding shares or ten per of corporation must submit a SUP by a duly elected and authorize	director, trust cent of any oth PLEMENTAL C	ee or person o er proprietary,	ontrolling or h , beneficial or	membership inter	er cent of rest in the	the issued as corporation,	nd , the
SIGNATURE REQUIREMENTS Initial Certificate of Disclosure:	This Compl	ete and attach	an Incorpora	all incorporators.	orm C084.		
Foreign corporations:		ertificate may pard of Director		a duly authorized	officer or	by the Chair	man of
Credit Unions and Loan Compa	nies: This C	ertificate must	be signed by	any 2 officers or	directors.		
hirley Madkins			Lawre	nce Madkins Ji	•		
ame			Name				
3225 W. Junipero Dr.	· · · · · · · · · · · · · · · · · · ·		13225	W. Junipero Di	<u>r.                                      </u>	·	<del> </del>
				-			
tress 2 un City West	AZ	85375	Address Sun C	ty West		AZ	85375
UNITED STATES	State	Zip	City Country	UNITED STAT	TES	State	Zip
IGNATURE - see Instructions	C003i;			TURE - see Instr	uctions Co	003i:	
by checking the box marked "I a under penalty of perjury that thi uny attachments is submitted in aw.	s document to	gether with	under	cking the box man penalty of perjury tachments is subn	that this onlitted in co	document to ompliance wi	gether with "
Thirty Wade	ms		Signato	Jurence H	So pad	KINS )	•
Shirley Madkins	Oct	15,2012		ence Madkins			10.15
Printed Name EQUIRED — check only one:	-	' Date '	Printed REOU!	Name IRED – check on	ly one:		Date
Incorporator - I am an a corporation submitting the Officer - I am an officer submitting this Certificate		Incorporator - I corporation subm Officer - I am an submitting this Co	am an indication and an indication and indication and indication and indicated and ind	Certificate. the corpora	ition		
Chairman of the Board of Chairman of the Board of submitting this Certificate Director - I am a Director		Chairman of the E chairman of the E submitting this Co Director - I am a	Board of D ertificate. a Director	irectors of the oredit	ne corporation		
company submitting this	Certificate.			company submitt	ing this Ce	ertificate.	
Filing Fee: None (regular pro Expedited processing - add \$	35.00 to filing		130	ona Corporation C 0 W. Washington			
Ail fees are nonrefundable - s				2-542-4100 ou should seek private k	egal counsel (	or those matters	that may pertak

to the increase insects or your customess.

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