Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000163724 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your brown from Doing so will generate another cover sheet.

Please retain original filing

Division of Corporations
Fax Number : (850) 617-63 Quie of submission when the corporation of th

To:

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

### FOREIGN PROFIT/NONPROFIT CORPORATION National Staff Assault Task Force

Certificate of Status	0
Certified Copy	0
Page Count	05/ (1
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

6/20/2012

https://efile.sunbiz.org/scripts/efilcovr.exe

90/10 394d

CT CORPORATION

8656336092

ET:00 ZI0Z/9I/80



August 16, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: NATIONAL STAFF ASSAULT TASK FORCE INC.

REF: W12000042842

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

If you have any further questions concerning your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section FAX Aud. #: H12000163724 Letter Number: 012A00021138

12 JUN 20 MM 9: 22

P.O BOX 6327 - Tallahassee, Florida 32314

### **COVER LETTER**

TO:	New Filing S Division of C				
OX 100 X	na con	National S	Staff Assault Task Force Inc.	•	
SUBJ	ECI:	Name of Corporat	ion – must include suffix		
		•		•	
Dear S	ir or Madam:				
"Certif	ficate of Existen	tion by Foreign Not for Prof ce", or "Cerificate of Good S on to conduct its affairs in F	it Corporation for Authoriza tanding" and check are submorida.	ation to Conduct its A mitted to register the a	ffairs in Florida", above referenced
Please	return all corres	pondence concerning this m	atter to the following:	•	
		•	4 N		
			Arcadia Venegas Name of Person		
			Name of Person	•	
		Nationa	l Staff Assault Task Force Inc.		•
			Firm/Company	····	•
				•	
•	• • • • • • • • • • • • • • • • • • • •		PO Box 3351		
			Address	,	
			•	•	
		Qu	artz Hill, CA 93586-0351		- 12 · 12
			ity/State and Zip Code		<b>&gt;</b>
	•				
			g@nsatf.org	<u> </u>	N 35.3
	E-n	nail address: (to be used for	future annual report notifica	tion)	
<b>33</b> 0			11.		Action and the second s
For fu	rther information	concerning this matter, plea	aso can;		174
					9 (A) 2 (##)
•		at	( )		\(\chi_{\chi}^{\operatorname{\pi}}\)
	Name	of Person	Area Code & Daytime Te	lephone Number	
				•	
	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, Fi	ction rporations	New Filing So Division of C Clifton Buildi	orporations ing ve Center Circle	:
Enclos	ed is a check for	the following amount:			
<b>57</b> /	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Certificate of the Certified Copy	Status &

## 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:

1		nai Start Assault 1				
(Name of corpo import in langu in the name at p	oration: must include the word "INC age as will clearly indicate that it is present. "Company" or "Co." may n	ORPORATED" or a corporation inste- not be used as a corp	"CORPORA ad of a nature corate suffix I	TION" or words or abbreviat al person or partnership if not by a nonprofit corporation.)	ions of like so contained	i
2	Washington	3.		26-0184210		
(State or cou	ntry under the law of which it is in	corporated)	(FE	number, if applicable)		
4.	05/15/2007	<b>5</b> .		Perpetual		
(I	Date of Incorporation)	(Du	ration: Year	corp. will cease to exist or "pe	rpetual")	
6	•	upon filing		•		
(Date first cond	ucted affairs in Florida if prior to reg	istration. See section	s 617.1501 &	617.1502, F.S. to determine p	enalty liabilit	y)
7	4610 Pas	eo Hermoso Palmdi	ale, CA 9355	1		
		(Principal office a	ddress)			,
	PO Bo	x 3351 Quartz Hill,	CA 93586			
		(Current mailing				
		•	•			
U	Additional benefi	it program for assau	lted Law Enf	prosment	7	
(Purpose(s) of	corporation authorized in home sta	te or country to be	arried out in	the state of Florida)	Tarrent Tarrent Tarrent Tarrent Tarrent Tarrent	art i
				. * * *	125 122	
9. Name and str	eet address of Florida registered	agent: (P.O. Box	NOT accep	table)	20	(4) - 18
<b>&gt; Y</b>	C T Corporation System				3535 	
Name;	C 1 Corporation System				ۻٙ	نظمي پڏموني پو≁مر
Office Address:	1200 South Pine Island Road	•			2	*
	•	<u></u>			1/2	196 196
•	Plantation,	, Fk	orida	33324		
	(Cíty)			(Zip Code)		
10 Daniation	-	•				
Having been no	agent's acceptance: smed as registered agent and to	accept service of	process for	the above stated corporati	on at the ol	ace
designated in th	is application. I hereby accept.	the appointment c	is registered	i agent and agree to act in	this capaci	ltv. I
further agree to and I am famili	comply with the provisions of ar with and accept the obligation	all Statutes relativ ons of my position	e to the proj as register	per and complete performi ed avent.	ince of my	dules,
		···3 mg free and			•	•
	C T Corporation Syst		. (	aia Rrugo		•
				nie Bryan		
. В	y: Comie Ba	Marie Marie	Acciete	ant Secretary	•	•
		(registered agent's	signement.	WILL DAMAGE A	•	

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.

12. Names and addresses of officers and/or directors:

2. 14miles and addresses of different mid-of differents,		,	
A. DIRECTORS			
heirman: Charles Hughes		· .	
oddress: PO Box 3351	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
Quartz Hill, CA 93586		<u></u> <u>-</u> -	<u> </u>
ice Chairman: Robert Davis	. <del></del>		
ddress: PO Box 3351	·		
Quartz Hill, CA 93586	·		
irector: James Wallace			
ddress: PO Box 3351			
Quartz Hill, CA 93586			
irector: Richard Bojorquez		·	
ddress: PO Box 3351			· · · · · · · · · · · · · · · · · · ·
Quartz Hill, CA 93586			
OFFICERS			
esident: Charles Hughos			<b>™</b>
Idress: PO Box 3351			7
Quartz Hill, CA 93586			3
ce President: Robert Davis	· · · · · · · · · · · · · · · · · · ·		1234
dress: PO Box 3351			<u></u> 2
Quartz Hill, CA 93586			
retary: Rocky Stroud	<u> </u>		
PO Box 3351 Quartz Hill, CA 93586	<del></del>	·	<del>,</del> _
asurer: Rocky Stroud			•
dress: PO Box 3351 Quartz Hill, CA 93586			
,			

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12 DCO X
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. (Typed or printed name and capacity of person signing application)
(Typed or printed name and capacity of person signing application)



Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

# CERTIFICATE OF EXISTENCE/AUTHORIZATION OF

#### NATIONAL STAFF ASSAULT TASK FORCE

I FURTHER CERTIFY that the records on file in this office show that the above named Non-Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 5/15/2007.

I FURTHER CERTIFY that as of the date of this certificate, NATIONAL STAFF ASSAULT TASK FORCE remains active and has complied with the filing requirements of this office.

Date: June 19, 2012

UBI: 602-726-207

22



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State