F12000005049

(Requestor's Name)			
(Address)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(Boodine Nambel)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
have go by of.			
Marin			

Office Use Only



600241690586

11/14/12--01012--004 **70.00

212°

SECRETATION STATE

A BOYON DEE 1. P. M.

COVER LETTER

TO:	New Filing Se Division of Co				
SUBJ	ECT:	Ki	dzmatter, Inc.		
БСВ	Be1	Name of Corporati	on – must include suffix		
Dear S	ir or Madam:				
"Certif	ficate of Existence		tanding" and check are su	zation to Conduct its Affairs in Florida bmitted to register the above reference	
Please	return all corresp	ondence concerning this ma	atter to the following:		
			Jodi Baxter		
			Name of Person		
			Kidzmatter		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·	
	•		1 E Bode Road		
			Address		
			eamwood, IL 60107		
		C	ty/State and Zip Code		
		legal@kid	zmatter.com		
	E-m	ail address: (to be used for	future annual report notifi	cation)	
For fu	rther information	concerning this matter, plea	ase call:		
		Baxter at	\	640-4536	
	Name o	of Person	Area Code & Daytime	Telephone Number	
MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclo	sed is a check for	the following amount:			
₽ \$7	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	



BECEIVED ② DEC 17 PM 2:54

FLORIDA DEPARTMENT OF STATE ALL SEE CORUM Division of Corporations

November 15, 2012

JODI BAXTER 1 E BODE ROAD STREAMWOOD, IL 60107

SUBJECT: KIDZMATTER, INC. Ref. Number: W12000057779

We have received your document for KIDZMATTER, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tim Burch Regulatory Specialist II

Letter Number: 612A00027618

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.	Kidzmatter, 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 contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)							
2.	Illinois (State or country under the law of which it is incorporated)						
4	9/21/2010 (Date of Incorporation)	5.		perpetual			
	(Date of Incorporation)	(Di	iration: Year	corp. will cease to ex	ist or "perpetu	al")	
6.	Date first conducted affairs in Florida if prior to registrat	6/12/2012	l ·				
(Date first conducted affairs in Florida if prior to registrat	ion. See section	ns 617.1501	& 617.1502, F.S. to de			
7	1 E Bode Road,	Streamwo	od, Illinois	60107) T1	
_	(Principal office address)					; =	
	Same Same					0 =	
-			address)				
	(Current mailing address)						
						л A	
8.	religious childrens and youth ministry, Purpose(s) of corporation authorized in home state or	programs,	products	and other relate	a purposes	S.	
ί.	i dipose(s) or corporation authorized in nome state or	country to be	carried out i	i the state of Florida)			
9. 1	Name and street address of Florida registered age	nt: (P.O. Box	NOT acce	ptable)			
	Name: Corporation Service Compan	ıv					
	rvaine.	,					
Off	fice Address: 1201 Hays Street						
	Tallahassee	771		32301			
	(City)	, Fl	orida	(Zip Code)) 		
	(31.5)			(2.5 0000)	,		

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.

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:

		•	ŧ	
A.	DIRECTORS			

Chairman: Jack Eggar	
Address: 1 E Bode Road	
Streamwood, IL 60107	
Vice Chairman:	
Address:	
	72 SEC
Director: Lyn Loven	0.00 DEC
Address: 1 E Bode Road	3/2
Streamwood, IL 60107	3 8 8
Director: Ryan Frank	- 1 リーラー - 1 リーラー - 1 リー - 1 リ
Address: 432 E Val Lane	
Marion, IN 46952	
B. OFFICERS	
President: Ryan Frank	
Address: 432 E Val Lane	
Marion, IN 46952	
Vice President:	
Address:	
Secretary: Lyn Loven	
Address: 1 E Bode Road, Streamwood, IL 60107	
Treasurer: Lyn Loven	•
Address: 1 E Bode Road, Streamwood, IL 60107	
NOTE: If necessary, you may attach an addendum to the application listing addit	tional officers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number	or 12 of the oralization)
Lyn Lavan Carreton/Transurar	er 12 or the application)
Lyn Loven, Secretary/Treasurer (Typed or printed name and capacity of person signing a	pplication)

File Number

6721-981-3



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

KIDZMATTER, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON SEPTEMBER 21, 2010, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 5TH

day of

DECEMBER

A.D.

2012

Authentication #: 1234002294

Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE