

F1800005786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

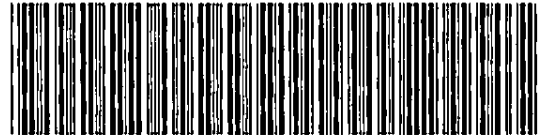
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MENTAL FITNESS, INC.
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

ROBYN HUSSA FARRELL, CEO
Name of Person

MENTAL FITNESS, INC
Firm/Company

160 E. SAINT JOHN STREET
3RD FLOOR
Address

SPARTANBURG, SC 29306
City/State and Zip Code

r.farrell@mentalfitnessinc.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robyn Hussa Farrell at (917) 771-4977
Name of Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. Mental Fitness, 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.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Wisconsin

3. 20-8489636

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

4. February 12, 2007

(Date of Incorporation)

5. _____
(Date of duration, if other than perpetual)

6. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

160 E. Saint John Street, 3rd Floor, Spartanburg, SC 29306

(Principal office address)

(Current mailing address, if different)

We build resilience in youth through evidence-based programs.

Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Registered Agents Inc.

Address: 3030 N. Rocky Point Dr. STE 150A

Tampa

(City)

Florida 33607

(Zip Code)

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Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place named in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I 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.



(Registered agent's signature)

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

A. DIRECTORS

Chairman: (see President below)

Address: _____

Vice Chairman: _____

Address: _____

Director: Robyn Hussa Farrell, Founder & CEO

Address: 160 E. Saint John Street, 3rd Floor

Spartanburg, SC 29306

Director: Valerie Barnett

Address: 168 W. Main Street

Spartanburg, SC 29306

B. OFFICERS

President: Betsy Neely Sikma

Address: 105 N. Pine Street

Spartanburg, SC 29302

Vice President: _____

Address: _____

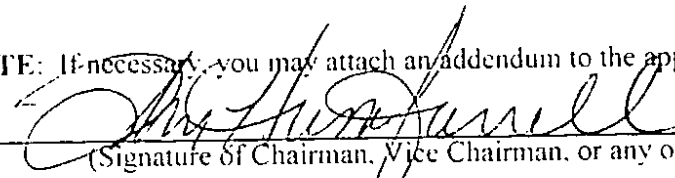
Secretary: Samantha Nicholson, J.D.

Address: 753 E. Main Street #1 Spartanburg, SC 29302

Treasurer: Jessica Mata, CPA

Address: 180 Alabama St., Spartanburg, SC 29302

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors



(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

Robyn Hussa Farrell, Founder & CEO

(Typed or printed name and capacity of person signing application)

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Officers and Directors

OFFICERS

ROBYN HUSSA FARRELL [FOUNDER & CEO], [LinkedIn](#)

Sig Other: Tim Farrell

Home: 100 E. Main Street, #20
Spartanburg, SC 29306
(917) 771-4977 (cell)
robyn.hussa@gmail.com

Work: Mental Fitness, Inc.
160 East Saint John Street, 3rd Floor
Spartanburg, SC 29306

BETSY NEELY SIKMA [PRESIDENT]

Sig Other: Jason Sikma

Work: Spartanburg Chamber of Commerce
105 N. Pine Street
Spartanburg, SC 29302
bsikma@spartanburgchamber.com
615-495-3551

SAMANTHA OVERTON CAMPBELL [SECRETARY, PRESIDENT-ELECT]

Work: Mary Black Foundation
349 E. Main Street
Spartanburg, SC 29302

JESSICA MATA [TREASURER]

Home: 107 Wellington Drive
Moore, SC 29369
864-497-7517
jessica@gmricpas.com
thumper191@aol.com

Work: Gosnell, Menard, Robinson
180 Alabama St.
Spartanburg, SC 29302

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Officers and Directors

DR. PATRICIA LEAVY

Home: 1 Lockwood Drive
Kennebunk, ME 04043
207-967-6434
pleavy@aol.com

SAMANTHA NICHOLSON

Work: Hyde Law Firm
753 E. Main Street, Ste 1
Spartanburg, SC 29302
864-804-6330 (O)

CRYSTAL PACE

Sig Other: Jennifer Pace

Home: Crystal and Jennifer Pace
318 Harrell Drive
Spartanburg, SC 29307
Work: Spartanburg Marriott
299 North Church Street
Spartanburg, SC 29306
864-591-3236 (O)
864-541-1098 (C)
crystal.pace@marriott.com

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

United States of America

State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS



To All to Whom These Presents Shall Come, Greeting:

I, Robert J. Karis, Expedited Service Specialist of the Corporation Section of the Division of Corporate & Consumer Services, do hereby certify that

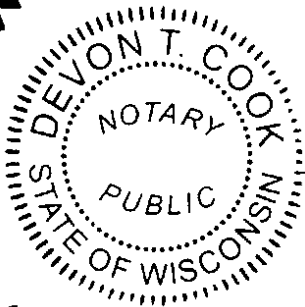
MENTAL FITNESS, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is February 12, 2007.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120, Wis. Stats., and that it has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on October 10, 2018.

ROBERT J. KARIS
Expedited Service Specialist
Division of Corporate and Consumer Services



DEVON T. COOK
Notary Public, State of Wisconsin
My commission expires January 16, 2022.

State of Wisconsin

} ss.

County of Dane

Personally came before me on October 10, 2018, the
aforenamed Robert J. Karis, to me known to be the
person who executed the foregoing certificate, and
acknowledged the same.