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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

2015 OCT -5 AM 8:39
SECRETARY OF STATE
TALLAHASSEE FLORIDA

****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 JIMMY WHISPERS KNOCKING OUT BULLYING INC

Certificate of Status	0
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OCT 06 2015
J. HARRIS

**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. JIMMY WHISPERS KNOCKING OUT BULLYING 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. New York

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

3. n/a

(FEI number, if applicable)

4. 10/17/2013

(Date of Incorporation)

5. Perpetual

(Date of duration, if other than perpetual)

6. Upon Qualification

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

7. 3221 SOUTH OCEAN BLVD BLD 2 APT 107, HIGHLAND BEACH, FL 33487

(Principal office address)

3221 SOUTH OCEAN BLVD BLD 2 APT 107, HIGHLAND BEACH, FL 33487

(Current mailing address, if different)

8. Charitable purpose of aiding school age children who have been bullied in their local communities.

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

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

Name: Registered Agents Inc

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

Tampa

(City)

Florida 33607

(Zip Code)

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.



Bill Havre, Assistant Secretary

(Registered agent's signature)

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.

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2015 OCT -5 AM 8:39

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: _____

Address: _____

Director: CLEMENT CASERTA

Address: 3221 SOUTH OCEAN BLVD BLD 2 APT 107, HIGHLAND BEACH, FL 33487

Director: ELLEN CASERTA

Address: 3221 SOUTH OCEAN BLVD BLD 2 APT 107, HIGHLAND BEACH, FL 33487

Director: MARIA RUSSO

Address: 3221 SOUTH OCEAN BLVD BLD 2 APT 107, HIGHLAND BEACH, FL 33487

B. OFFICERS

President: CLEMENT CASERTA

Address: 3221 SOUTH OCEAN BLVD BLD 2 APT 107
HIGHLAND BEACH, FL 33487

Vice President: _____

Address: _____

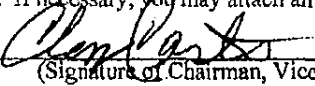
Secretary: ELLEN CASERTA

Address: 3221 SOUTH OCEAN BLVD BLD 2 APT 107, HIGHLAND BEACH, FL 33487

Treasurer: MARIA RUSSO

Address: 3221 SOUTH OCEAN BLVD BLD 2 APT 107, HIGHLAND BEACH, FL 33487

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

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

14. CLEMENT CASERTA, President
(Typed or printed name and capacity of person signing application)

FILED
2015 OCT -5 AM 8:39
SUN OCT 5 2015
TALLAHASSEE FLORIDA

**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of JIMMY WHISPERS KNOCKING OUT BULLYING INC was filed on 10/17/2013, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 30th day of September
two thousand and fifteen.*

Anthony Giardina

Anthony Giardina
Executive Deputy Secretary of State