

F17000000165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

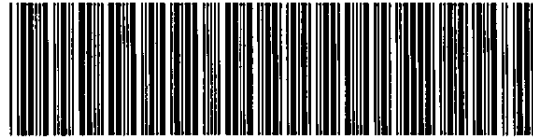
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Filing Office
JAN 9 2017

M. MILLIGAN
JAN 12 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: American Online Giving Foundation, 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:

Jonathan T. McCants

Name of Person

Bird Loechl Brittain & McCants, LLC

Firm/Company

3414 Peachtree Road, NE

Suite 1150

Address

Atlanta, GA 30326

City/State and Zip Code

JMcCants@Birdlawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jonathan T. McCants

404

264-9400

Name of Person

at ()

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. American Online Giving Foundation, 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. Georgia 3. 81-0739440
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 12/03/15 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. 01/29/17
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty (liability).)

7. 200 Main Street, Safety Harbor, FL 34695
(Principal office address)

P.O. Box 1010, Safety Harbor, FL 34695
(Current mailing address, if different)

8. Charitable grantmaking & DAP maintenance
(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: Capitol Corporate Services, Inc.

Office Address: 155 Office Plaza Drive, Suite A

Tallahassee, Florida 32301
(City) (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.

Sadi Boyette
(Registered agent's signature)

Sadi Boyette, Asst. Secretary on behalf of
Capitol Corporate Services, Inc.

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

A. DIRECTORS

Chairman: Bryan de Lottinville

Address: P.O. Box 1010

Safety Harbor, FL 34695

Vice Chairman:

Address:

Director: Kathy Fields

Address: P.O. Box 1010

Safety Harbor, FL 34695

Director: David Pamerter

Address: P.O. Box 1010

Safety Harbor, FL 34695

B. OFFICERS

President: Bryan de Lottinville

Address: P.O. Box 1010

Safety Harbor, FL 34695

Vice President:

Address:

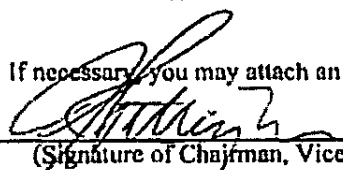
Secretary: James Pettigrew

Address: P.O. Box 1010, Safety Harbor, FL 34695

Treasurer: David Pamerter

Address: P.O. Box 1010, Safety Harbor, FL 34695

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. James Pettigrew, Secretary

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

2017 JAN -9 AM 10:35
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STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

AMERICAN ONLINE GIVING FOUNDATION, INC.

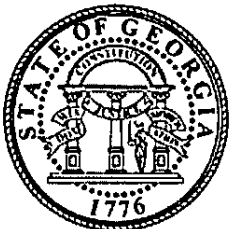
a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 13764359
Date Inc/Auth/Filed : 12/03/2015
Jurisdiction : Georgia
Print Date : 12/29/2016
Form Number : 211



B. P. Kemp

Brian P. Kemp
Secretary of State