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Qualification/Tax Lien Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

April 26, 2000

JEREMIAH JOHNSON  
1516 ESPANOLA AVE., UNIT F  
HOLLY HILL, FL 32117

SUBJECT: UNNIVERSAL IMPACT CENTER INC.  
Ref. Number: W00000010917

We have received your document for UNNIVERSAL IMPACT CENTER 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):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 800A00022803

**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. **Universal Impact Center 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)

3. \_\_\_\_\_

(FEI number, if applicable)

4. **8-3-98**

(Date of Incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. **5-15-2000**

(Date corporation first conducted Affairs in Florida -  
See sections 617.1501, 617.1502, and 817.155, F.S.)

7. **1516 Espanola Ave unit F  
Holly Hill Florida 32117**

(Current mailing address)

8. **Educational, Charitable, Social and Benevolent**

(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:

**Jeremiah Johnson**

(Name)

**1516 Espanola Ave unit F**

(Office address)

**Holly Hill**

(City)

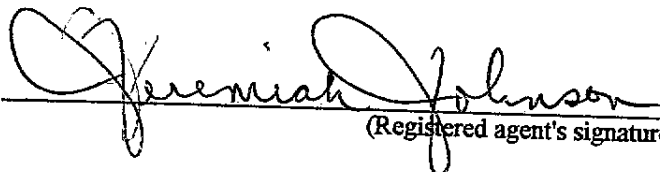
Florida,

**32117**

(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.*



(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.

12. Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: Carilyn Johnson

Address: 4944 W. Erie St  
Chgo, IL 60644

Vice Chairman: Begory Golden

Address: 1337 W. Laramie  
Chgo, IL 60651

Director: Susie Meadows

Address: 5448 W. Flournoy  
Chgo, IL 60644

Director: Angelique Russell Williams

Address: 3413 W 83rd  
Chgo, IL 60652

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13 Carilyn Johnson

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

Chairman

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

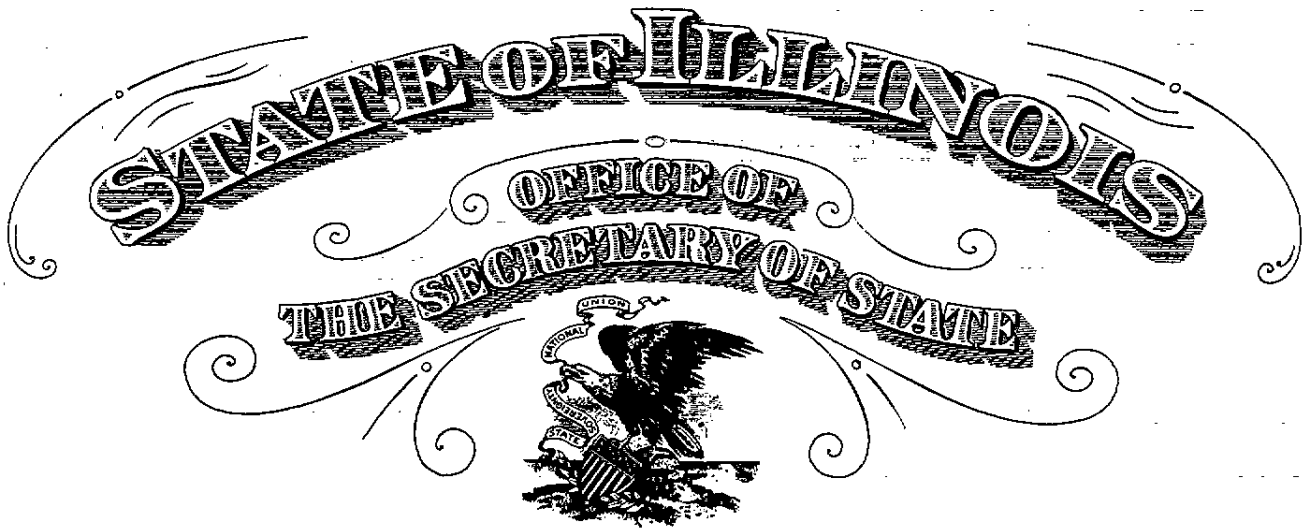
Carilyn Johnson

RECEIVED  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

00 MAY 12 PM 1:41

FILED

File Number 6006-790-2



*To all to whom these Presents Shall Come, Greeting:*

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

UNIVERSAL IMPACT CENTER, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE AUGUST 3, 1998, 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 A DOMESTIC CORPORATION IN GOOD STANDING IN THE STATE OF ILLINOIS\*\*\*\*\*

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RECEIVED  
STATE  
FEB 14 1999



*In Testimony Whereof, I, hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 4TH *day of* MAY *A.D.* 2000

*Jesse White*

SECRETARY OF STATE