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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

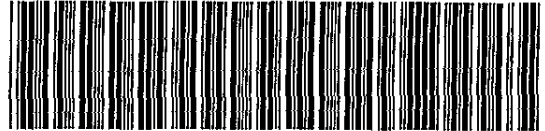
(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

06/06/03--01018--013 **87.50

J. BRYAN JUN 11 2003

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The HomePlace Shelter 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", 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:

Howard Mitchell Jr.
(Name of Person)

The HomePlace Shelter Inc.
(Firm/Company)

612 East Clay st.
(Address)

Thomasville, Ga. 31792
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Howard Mitchell, Jr. at (229) 225-3986
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

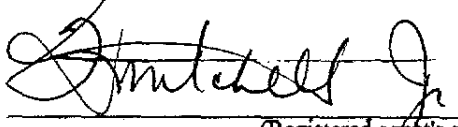
MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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. The Home Place Shelter 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. Georgia
(State or country under the law of which it is incorporated)
3. 74-3039901
(FEI number, if applicable)
4. 04/03/2002
(Date of Incorporation)
5. on going
(Duration: Year corp. will cease to exist or "perpetual")
6. 06-01-2003
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)
7. 5407 Dills Rd. Monticello Fla. 32344
(Principal office address)
612 East Clay st. Thomasville Ga. 31792
(Current mailing address)
8. To provide Permanent Supportive Housing for persons with disabilities
(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 or Mail Drop Box **NOT** acceptable)
Name: Howard Mitchell Jr.
Office Address: 5455 Dills Rd.
Monticello, Florida 32344
(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.

(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.

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TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: Dr. Hetal Patel

Address: 1102 Smith Ave

Thomasville Ga. 31792

Vice Chairman: Jerry Jackson

Address: 525 Cassidy Rd.

Thomasville, Ga. 31792

Director: Howard Mitchell Jr.

Address: 5455 Dills Rd.

Monticello, Fla. 32344

Director: Tramman Ward

Address: 5407 Dills Rd.

Monticello, Fla. 32344

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B. OFFICERS

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. Hetal Patel M.D.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Dr. Hetal Patel
(Typed or printed name and capacity of person signing application)

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 023470613
CONTROL NUMBER : 0218854
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JURISDICTION : GEORGIA
PRINT DATE : 12/13/2002
FORM NUMBER : 211

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

HOWARD MITCHELL, JR.
THE HOMEPLACE SHELTER INC.
229 EAST JEFFERSON ST.
THOMASVILLE, GA 31792

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

THE HOMEPLACE SHELTER INC.
A DOMESTIC NONPROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above 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.



Cathy Cox

Cathy Cox
Secretary of State