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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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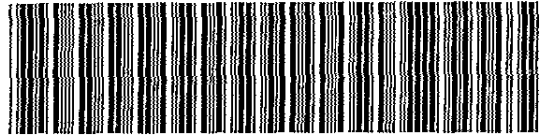
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOLDEN RETRIEVERS IN NEED RESCUE SERVICE, 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:

MARY ELLEN METRO
(Name of Person)

GOLDEN RETRIEVERS IN NEED RESCUE SERVICE, INC SWF Chapter
(Firm/Company)

720 TURKEY OAK LANE
(Address)

NAPLES, FL. 34108-8550
(City/State and Zip Code)

For further information concerning this matter, please call:

MARY ELLEN METRO at (239) 514 2715
(Name of Person) (Area Code & Daytime Telephone Number)

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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. GOLDEN RETRIEVERS IN NEED RESCUE SERVICE, 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. OHIO 3. 34-1712705
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. JUNE 30, 1992 5. PERPETUAL
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. DECEMBER 4, 2003
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)
7. 720 TURKEY OAK LANE NAPLES, FL 34108-8550 (SWF
(Principal office address) CHAPT:
15968 WEDGEWOOD LANE STRONGSVILLE, OHIO 44136
(Current mailing address)

8. TO PROVIDE FOR THE WELFARE, CARE, PLACEMENT AND ADOPTION OF
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) GOLDEN RETRIEVER DOGS

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

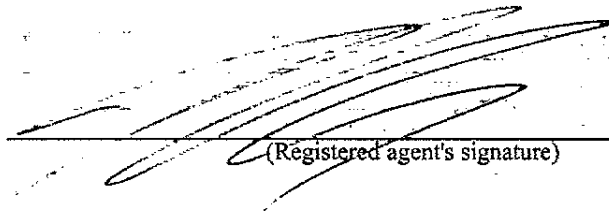
Name: JOSHUA M. BIALEK
PORTER WRIGHT MORRIS + ARTHUR LLP

Office Address: 5801 PELICAN BAY BLVD SUITE 300
NAPLES, Florida 34108
(City) (Zip Code)

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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:

A. DIRECTORS

Chairman: SWF CHAPTER MARY ELLEN METRO

Address: 720 TURKEY OAK LANE
NAPLES, FL. 34108-8550

Vice Chairman: _____

Address: _____

Director: CHRIS SEBRASKY

Address: 220 EAST 328TH STREET
WILLOWICK, OHIO 44095

Director: DENNY KREIDER

Address: 10055 MT. EATON ROAD
WADSWORTH, OHIO 44281

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B. OFFICERS

President: APRIL HAKAIM

Address: 15968 WEDGEWOOD LANE
STRONGSVILLE, OHIO 44136

Vice President: STEPHANIE GOULD

Address: 4744 RUBY LANE
BRUNSWICK, OHIO 44212

Secretary: CARRIE CIESLA

Address: 1200 BENTWOOD ROAD CLEVELAND HTS, OHIO 44121

Treasurer: STEVE MATTHEWS

Address: 1200 BENTWOOD ROAD CLEVELAND HTS, OHIO 44121

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

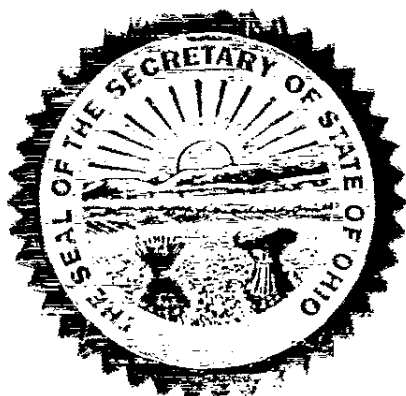
13. Mary Ellen Metro
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. MARY ELLEN METRO GRIN SWF CHAPTER CHAIRMAN
(Typed or printed name and capacity of person signing application)

**UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE**

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show GOLDEN RETRIEVERS IN NEED RESCUE SERVICE, INC., an Ohio not for profit Corporation, Charter No. 823073, having its principal location in Seven Hills, County of Cuyahoga, was incorporated on June 30, 1992, and is currently in GOOD STANDING upon the records of this office.

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Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 26th day of November, A.D. 2003.

J. Kenneth Blackwell
Ohio Secretary of State