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(Re	equestor's Name)	
(Ad	ddress)	
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(Ci	ity/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
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TRANSMITTAL LETTER

то:	O: Registration Section Division of Corporations						
SUBJ	ECT: Charitable Horizons Foundation, Inc. (Name of Corporation – must include suffix)	-					
Dear S	ir or Madam:						
Affairs	closed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", and check are submitted to register the above referenced profit corporation to conduct its affairs in Florida.						
Please	return all correspondence concerning this matter to the following:						
	Jeffrey C. Zysik						
	(Name of Person)	٠					
	Charitable Entity Administration, LLC (Firm/Company)						
	1975 E. Sunrise Blvd. Suite 823						
	F 455	Marine Figures					
	Suite 823						
	(Address)						
	(Address)	und [®]					
	Fort Lauderdale, FL 33304 (City/State and Zip Code)						
	(City/State and 2stp code)						
For furt	her information concerning this matter, please call:						
_	C. Zysik at (954) 525-0021 Name of Person) (Area Code & Daytime Telephone Number)						
(1	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						
Enclose	d is a check for the following amount:						
Ø \$70.	00 Filing Fee Sertificate of Status Sertified Copy Sertified Copy Sertified Copy Certified Copy 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 Charitable F	Horizons Foundation,	Inc.					
import in langu	oration: must include the lage as will clearly indic present. "Company" or '	rate that it is a corno	ration instead of	f a natural nerso:	n or partnership if r	iot so contai	ned
2. Delaware			3, 20-00204	158			
(State or cou	untry under the law of w	hich it is incorporate	ed)	(FEI numbe	er, if applicable)		— ·
4, 04/11/2003			5. Perpetua				
(Date of Incorporation)		(Duration	n: Year corp. wi	Il cease to exist or	"perpetual")	,
6. N/A							
(Date first cond	ducted affairs in Florida i	f prior to registration.	See sections 617	7.1501 & 617.15	02, F.S, to determine	e penalty liak	oility.)
~ 32 Broadviev	w Drive, Barrington, R	1 02806-4012					
7. <u>02 biodavio</u>		(Princi	pal office addres	ss)			 .
1975 E. Suni	rise Blvd., Suite 823, I		L 33304 ent mailing addi	rasel			→ •.
		(Cur	ent mannig accu	icsa)			
						# . .	1
8. To carry out e	exclusively charitable accomporation authorized	tivities within the m	eaning of Sec. 5	501(c)(3) of the	FTT		6.— "
(Purpose(s) or	corporation authorized	in nome state or cou	intry to be carrie	ed out in the state	e of Fiorida)	3 Y	j
9. Name and str	reet address of Florida	registered agent:	(P.O. Box NO '	T acceptable)	្រាំ	=	111
			<u> </u>			T	11.00
Name:	Jeffrey C. Zysik		•			청정	
rvaine.				742	ۇ ئىسىۋ سىرى	25	• • •
Office Address	: 1975 E. Sunrise Blv	d., Suite 823					•
		 ,	· · · · · · · · · · · · · · · · · · ·		•		1. • .
	Fort Lauderdale		, Florida	33304			
		(City)	*		(Zip Code)		•
Having been no designated in th further agree to	d Agent's acceptance amed as registered ag his application, I here o comply with the pro iar with and accept th	gent and to accept : eby accept the appointsions of all statu	ointment as re ites relative to	gistered agent the proper and	' and agree to act d complete perfor	in this cap	acity. I
11. Attached is the Departr	s a Certificate of Exist	ence duly authenti	erga Aent's signa cated, not more or other official	e than 90 days	prior to delivery	of this appl	ication to
	under the law of whi						

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

A	D	D	E	C	r,	n	D	C
Α.	131	115	· III	١.	1	J	к	כו

Chairman: Byron Jay Steenhuysen		· (1) ·		
Address: 32 Broadview Drive			<u> </u>	
Barrington, RI 02806	<u> </u>	· · · · · -	* * * * * * * * * * * * * * * * * * *	
Vice Chairman:	<u></u>			<u> </u>
Address:	. <u> </u>	, b.,		<u> </u>
	<u> </u>	<u> </u>	<u>سن څوه خه س .</u>	
Director: Jeffrey C. Zysik	<u></u>	- 	· # *	ية . يعاد فاهدي ال <u>ينوان</u>
Address: c/o Charitable Entity Administration, LLC	<u>., ;;</u>	· .* *		<u> </u>
1975 E. Sunrise Blvd., Suite 823, Fort Lauderdale, FL 3330	4	<i>p</i> . <u>‡</u> -	<u> </u>	<u>4 - 44</u> 2 - 1 - 1 - 1 - 1
Director: David Zaudtke				<u> </u>
Address: c/o Charitable Entity Administration, LLC	N AMERICAN SAFETY	•	AS S	
1975 E. Sunrise Blvd., Suite 823, Fort Lauderdale, FL 3330	 4 <u>د سور ، سح</u> د	÷		
B. OFFICERS President: Byron Jay Steenhuysen			TARY O	
00 D		<u> </u>	88 2 2	7
Address: 32 Broadview Drive Barrington, RI 02806			- 2g	
Vice President:		<u>. </u>		
Address:	egre e j			
		- , ,		
Secretary: Jeffrey C. Zysik			- 1	
Address: c/o Charitable Entity Administration, LLC, 1975 E. Sunrise E	lvd., Suite 820	3, Fort Lauderd	lale, FL_33304	
Treasurer: Jeffrey C. Zysik	. Str⊅ <u>a</u> s		ž,	
Address: c/o Charitable Entity Administration, LLC, 1975 E. Sunrise B			ale, FL_33304	
NOTE: If necessary, you may attach an addendum to the application				
(Signature of Chatrman, Vice Chairman, or any officer list	ed in number	12 of the appli	cation)	<u></u>
14. Jeffrey C. Zysik, Secretary & Treasurer (Typed or printed name and capacity of pe				
	-			

Addendum to Application by Foreign Non Profit Corporation for Authorization to Conduct its Affairs in Florida

12) Name and Address of Officers and/or Directors (continued)

A. Directors

Director:

Keith M. Douds

Address:

c/o Charitable Entity Administration, LLC

1975 E. Sunrise Blvd., Suite 823, Fort Lauderdale, FL 33304

Director:

Thomas Konjoyan

Address:

c/o Charitable Entity Administration, LLC

1975 E. Sunrise Blvd., Suite 823, Fort Lauderdale, FL 33304

SECRETARY OF STATE

Delaware

The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE CERTIFICATE OF
INCORPORATION OF "CHARITABLE HORIZONS FOUNDATION, INC.", WAS
RECEIVED AND FILED IN THIS OFFICE THE ELEVENTH DAY OF APRIL,
A.D. 2003.

AND I DO FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS

THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO

TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESATD CORPORATION IS A NON-PROFIT AND NON-STOCK CORPORATION

...

Warriet Smith Hindson

AUTHENTICATION: 3315225

040607501

3647425 8300C

DATE: 08-25-04