F05000004505

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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SAUG-4 MIII: 14

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| Bless Foundation, Inc | OS AUG-LA PH 1: OL SECULARIAS SEE, FLORIDA |
|----------------------------|--|
| | Art of Inc. File |
| | CTD Partnership File |
| | Foreign Corp. File |
| | L.C. File |
| | Fictitious Name File |
| | Trade/Service Mark |
| | Merger File |
| | Art. of Amend. File |
| | RA Resignation |
| | Dissolution / Withdrawal |
| | Annual Report / Reinstatement |
| | Cert. Copy |
| | Photo Copy |
| | Certificate of Good Standing |
| | Certificate of Status |
| | Certificate of Fictitious Name |
| | Corp Record Search |
| | Officer Search |
| | Fictitious Search |
| Signature | Fictitious Owner Search |
| | Vehicle Search |
| | Driving Record |
| Requested by: WL 8/4 11:00 | UCC 1 or 3 File |
| Name Date Time | UCC 11 Search |
| Tune Date Time | UCC 11 Retrieval |
| Walk-In Will Pick Up | Courier |

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:

| 2. WT SCONSTN (State or country under the law of which it is in | | natural person or partner suffix by a nonprofit corp | |
|---|---|---|---|
| | | | |
| 4. 12/02/1986 (Date of Incorporation) | 5 | PERPETUAL | |
| (Date of Incorporation) | (Duration: | Year corp. will cease to | exist or "perpetual") |
| 5. (Date first conducted affairs in Florida if prior to re | | | Zs o |
| (Date first conducted affairs in Florida if prior to re- | gistration. See sections 617.1 | 501 & 617.1502, F.S, to a | letermine pe halty liubility.) |
| 5718 52NO STREET K | ENOSHA WI | 53144 | |
| | | | |
| | CAME | | Te z in |
| | (Current mailing address | ss) | |
| | | | DRA : |
| B. NON-PROFIT FOUNDATION. (Purpose(s) of corporation authorized in home state). Name and street address of Florida registered. Name: RICHARD W. NORRI | TS, ESQ. | acceptable) | |
| | | | |
| ORLANDO (City) | - Florida | 32835 | |
| (City) | | (Zip Cod | e) |
| 10. Registered Agent's acceptance: Having been named as registered agent and to lesignated in this application, I hereby accept further agree to comply with the provisions of and I am familiar with and accept the obligati | t the appointment as regi fall statutes relative to th | istered agent and agree e proper and complete | to act in this capacity. I |

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: |
| Address: |
| |
| Vice Chairman: |
| Address: |
| |
| Director: |
| Address: |
| |
| Director: |
| Address: |
| |
| B. OFFICERS |
| President: MARK HESS |
| Address: 4417 DOWN POINT LANE |
| WINDERMERE, FL 32786 |
| Vice President: GAIL V. HESS |
| Address: 4413 DOWN POINT LANE |
| WINDERMERE, FL 32786 |
| Secretary: MILTON HESS |
| Address: 4413 DOWN POINT LANE WINDERMERE, FL 32786 |
| Treasurer: ROBERT BLOCK |
| Address: 4420 HAMPSHIRE HILL, WATERFORD, WI 53185 |
| NOTE: If necessary, you may attach a addendum to the application listing additional officers and/or directors. |
| (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) |
| 14(Typed or printed name and capacity of person signing application) |
| (-) Lan at Language and anhand or harony affirm white white |

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

BLESS FOUNDATION INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is December 2, 1986.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on August 3, 2005.

RAY ALLEN, Deputy Administrator Division Of Corporate & Consumer Services Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

16120-705011C4