

F09000002708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

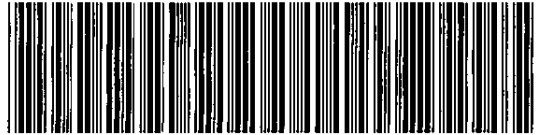
(Document Number)

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513
W09-30086



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7/08/09

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Touch Aid Foundation
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:

Steven L Jones

Name of Person

Touch Aid Foundation

Firm/Company

1321 Apopka Airport Rd, Unit 117

Address

Apopka, FL 32712

City/State and Zip Code

stevejones@touchaid.org

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Steven L Jones

Name of Person

at (407)

880-7722

Area Code & Daytime Telephone Number

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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



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DEPARTMENT OF STATE

FLORIDA DEPARTMENT OF STATE - 7 AM 9:25
Division of Corporations

June 29, 2009

STEVEN L JONES
1321 APOPKA AIRPORT ROAD
UNIT 117
APOPKA, FL 32712

SUBJECT: TOUCH AID FOUNDATION
Ref. Number: W09000030086

We have received your document for TOUCH AID FOUNDATION 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 name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return the corrected original and one copy of 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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 409A00022225

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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. Touch Aid Foundation, 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. Wyoming 3. 27-0415560
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10 June 2009 5. perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. not applicable
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 1321 Apopka Airport Rd Unit 117, Apopka FL 32712-5953
(Principal office address)
- 1321 Apopka Airport Rd Unit 117, Apopka FL 32712-5953
(Current mailing address)
8. Charitable, educational and scientific purposes under IRS 501(c)(3)
(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 **NOT** acceptable)
- Name: Steven L Jones
- Office Address: 1321 Apopka Airport Rd Unit 117
- Apopka, Florida 32712-5953
(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:

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A. DIRECTORS

Chairman: Steven L Jones

Address: 1321 Apopka Airport Rd Unit 117

Apopka, FL 32712

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Steven L Jones

Address: 1321 Apopka Airport Rd Unit 117

Apopka, FL 32712

Vice President: _____

Address: _____

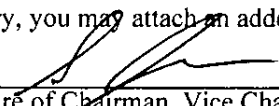
Secretary: Steven L Jones

Address: 1321 Apopka Airport Rd Unit 117, Apopka, FL 32712

Treasurer: Steven L Jones

Address: 1321 Apopka Airport Rd Unit 117, Apopka, FL 32712

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

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

14. Steven L Jones, Chairman
(Typed or printed name and capacity of person signing application)

STATE OF WYOMING
Office of the Secretary of State

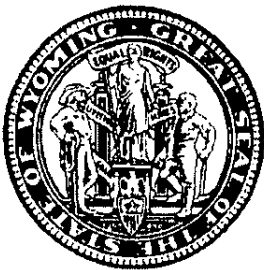
I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Touch Aid Foundation
is a
NonProfit Corporation

formed or qualified under the laws of Wyoming did on **June 10, 2009**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2009-000570887**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 23rd day of June, 2009 at 5:07 PM. This certificate is assigned 005521212.



Max Maxfield
Secretary of State

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