

F09000004765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

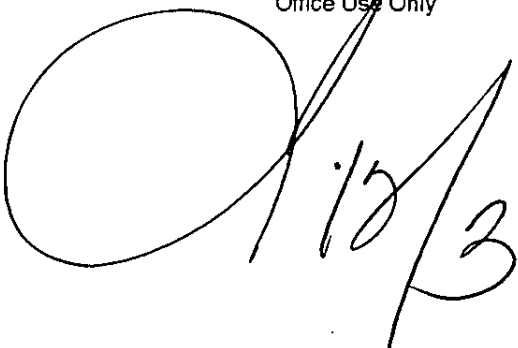
(Document Number)

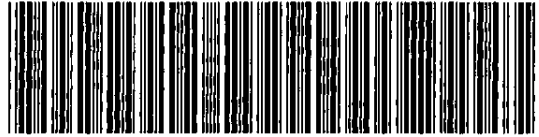
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~W09-51867~~

Office Use Only





200163018612

11/23/09--01046--009 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 DEC -2 PM 4: 09

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: The Adoption Authority, 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", or "Certificate of Good Standing" 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:

Tracy Wilds

Name of Person

The Adoption Authority, Inc

Firm/Company

461 Islamorada Drive S.

Address

Macclenny, FL 32063

City/State and Zip Code

tracymsw@gmail.com

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

For further information concerning this matter, please call:

Tracy Wilds

Name of Person

at (904)

704-2527

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 25, 2009

TRACY WILDS
THE ADOPTION AUTHORITY, INC.
461 ISLAMODA DRIVE S
MACCLENNY, FL 32063

SUBJECT: THE ADOPTION AUTHORITY, INC.
Ref. Number: W09000051867

We have received your document for THE ADOPTION AUTHORITY, INC. 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 designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

Please return 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) 245-6934.

Loria Poole
Regulatory Specialist II

Letter Number: 309A00036549

Tracy Wilds
The Adoption Authority, Inc.
461 Islamorada Dr
Macclenny, FL 32063
November 25, 2009

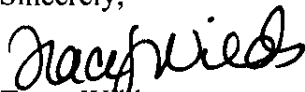
Florida Department of State
Division of Corporations
Corporate Filings
PO Box 6327
Tallahassee, FL 32314

To Whom it May Concern:

The Adoption Authority, Inc, a nonprofit corporation, was mistakenly filed as a domestic corporation on September 9th, 2008 under document number N08000008419. The corporation was originally incorporated in Georgia, and should have filed as a Florida foreign nonprofit. Dissolution of the domestic corporation was filed and processed on November 16, 2009 under document number N08000008419. The foreign corporation paperwork was processed on November 25, 2009 under document number W09000051867 however; the filing was rejected because the name is not available.

This is the same corporation and the filing was not intended as a complete dissolution but rather to correct the corporation type. Please allow the use of the name, "The Adoption Authority" by the foreign nonprofit corporation.

Sincerely,



Tracy Wilds
Director

RECEIVED
09 DEC - 1 AM 11:33
DIVISION OF CORPORATION

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 Adoption Authority, 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 3. 26-1449361
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 6/20/2007 5. perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. n/a
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 720 Amherst Street, Brunswick, GA 31520
(Principal office address)
- 720 Amherst Street, Brunswick, GA 31520
(Current mailing address)
8. Adoption Services
(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: Tracy Riley Wilds
- Office Address: 461 Islamorada Dr.
- Macclenny, Florida 32063
(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.
- Tracy Riley Wilds
(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.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 DEC -2 PM 4:00

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Tracy Riley Wilds

Address: 461 Islamorada Drive South
Macclenny, FL 32063

Director: Sabrina Murray

Address: 605 S. 3rd Street
Folkston, GA 32063

B. OFFICERS

President: Tracy Riley Wilds

Address: 461 Islamorada Drive South
Macclenny, FL 32063

Vice President: _____

Address: _____

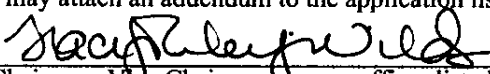
Secretary: Tracy Riley Wilds

Address: 461 Islamorada Drive South, Macclenny, FL 32063

Treasurer: Tracy Riley Wilds

Address: 461 Islamorada Drive South, Macclenny, FL 32063

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. Tracy Riley Wilds
(Typed or printed name and capacity of person signing application)

The Adoption Authority, Inc

Addendum:

Item 12, part A:

Director: Tessa Hodges

Address: 704 West Forest Avenue
Homerville, GA 31634

Control No. 07054350

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

THE ADOPTION AUTHORITY, INC.

Domestic Non-Profit Corporation

was formed or was authorized to transact business on 06/20/2007 in Georgia. 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 16th day of November, 2009

Karen C Handel
Secretary of State