

FO9000004942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

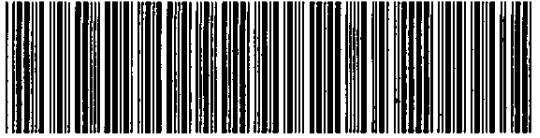
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WSP
209-45952
L/S
12/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2009

ANA EMILIA MIRANDA
14629 SW 104 ST #419
MIAMI, FL 33186

SUBJECT: GA AND A OUTREACH
Ref. Number: W09000045952

We have received your document for GA AND A OUTREACH and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word 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) 245-6929.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 309A00033051

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: GA AND A OUTREACH
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:

ANA EMILIA MIRANDA
Name of Person

Ana Emilia Miranda
Firm/Company

14629 SW 104 ST # 419
Address

MIAMI, FLORIDA 33186
City/State and Zip Code

mirandaamr@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANA EMILIA MIRANDA at (305) 389-1661
Name of Person 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

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. GA AND A OUTREACH 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. WASHINGTON 3. 27-6256111
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 07/31/2009 5. PERPETUAL
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 14629 SW 104 ST # 419 MIAMI, FL 33186
(Principal office address)
- 14629 SW 104 ST # 419 MIAMI, FL 33186
(Current mailing address)
8. ANY AND ALL LAWFUL BUSINESS
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Name: ANA EMILIA MIRANDA

Office Address: 14629 SW 104 ST # 419

MIAMI, Florida 33186
(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.


(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: ANA EMILIA MIRANDA

Address: 14629 SW 104 ST # 419
MIAMI, FL 33186

Vice Chairman: GLENDALIZ RONDON

Address: 14629 SW 104 ST # 419
MIAMI, FL 33186

Director: ANNEL STRICKLAND

Address: 14629 SW 104 ST # 419
MIAMI, FL 33186

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

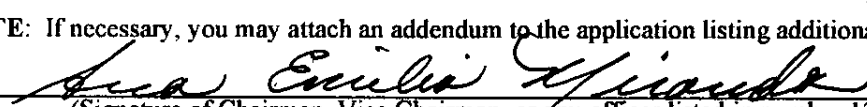
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. ANA EMILIA MIRANDA
(Typed or printed name and capacity of person signing application)

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2009 DEC 14 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

The State of



Washington

Secretary of State

I, **SAM REED**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF INCORPORATION

to

GA AND A OUTREACH

a/an WA Corporation Sole. Charter documents are effective on the date indicated below.

Date: 7/31/2009

UBI Number: 602-942-867

APPID: 1502439



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State