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

Office Use Only



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SECRETARY OF STATE
ANASSEE. FLORIDA

2, 10

COVER LETTER

	Co	OVER LETTER		E.
TO: New Filing Se	ction			, LEN
Division of Co			•	Old FFR
SUBJECT:		ance Now Incorpor	ated TALL	CRETARY OF STATE ORION ON Florida",
Dear Sir or Madam:				SEE. FLORIZE
"Certificate of Existence	ion by Foreign Not for Profit ", or "Cerificate of Good St n to conduct its affairs in Flo	anding" and check are sub-	ation to Conduct its Affairs in mitted to register the above in	in Florida", referenced
Please return all corresp	ondence concerning this ma	tter to the following:		
,		Rebecca Collier		
		Name of Person		
	Cooli			
33 W. First Street, Suite 600				
		Address		
	Dayto	on, Ohio 45402-1289 y/State and Zip Code		
		-		
E-ma	collier@co	ollaw.com iture annual report notifica	tion)	
	concerning this matter, pleas	_		
Rebecc	a Collier at (937) 449	9-5792	
	f Person	Area Code & Daytime Te		
MAILING ADI New Filing Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion porations	New Filing S Division of C Clifton Build	orporations ng ve Center Circle	
Enclosed is a check for t	he 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. Name of corn	Home Assistan	ce Now Incor	porated	hivaviations of like	
import in languin the name at	oration: must include the word "INCORPOR/ age as will clearly indicate that it is a corpora present. "Company" or "Co." may not be used	ation instead of a nat l as a corporate suffi	ural person or partnersh ix by a nonprofit corpor	nip if not so contained ation.)	
2.	Ohio	3.	27-0915032		
(State or cou	Ohio intry under the law of which it is incorporated	i) (1	(FEI number, if applicable)		
4	09/08/2009	5	perpetual (Duration: Year corp. will cease to exist or "perpetual")		
(Date of Incorporation)	ar corp. will cease to ex	ist or "perpetual")		
6	upon q ducted affairs in Florida if prior to registration. S	ualification			
(Date first cond	ducted affairs in Florida if prior to registration. S	ee sections 617 1501	& 617.1502, F.S, to det	ermine penalty liability.)	
7	2020 W. Alex Bell Ro	oad, Dayton Oh	io 45459		
	(Principa	al office address)			
	2020 W. Alex Bell Ro	ad. Davton, Oh	nio 45459		
	(Curren	nt mailing address)			
8. Provide	housing for low to medium in corporation authorized in home state or coun	ncome famili	es <i>a</i> nd elderly		
(Purpose(s) of	corporation authorized in home state or coun	try to be carried out	in the state of Florida)	2010 SE	
9. Name and str	eet address of Florida registered agent: (I	P.O. Box <u>NOT</u> acc	eptable)	2010 FEB -L SECRETARY ALLAHASSI	
				EB - 4 F	
Name:	William Hawthorne	, 		SERY -	
	45 Bass III a Blass #000			77 ' [J	
Office Address:	15 Paradise Plaza #233				
	Sarasota	, Florida	34239	高計 2	
	(City)	, Florida	(Zip Code)	7> U	
	l agent's acceptance: smed as registered agent and to accept se	ervice of process for	or the above stated co	progration at the place	
designated in th	is application, I hereby accept the appoi	ntment as register	red agent and agree to	o act in this capacity. I	
juriner agree io and I am famili	comply with the provisions of all statute ar with and accept the obligations of my	s retative to the pl position as regist	roper ana compiete p ered agent.	erjormance oj my auties,	
				•	
		/ 1/			
	Willin PX6	17/			
	(Registere	d agent's signature)		11.00.00 to 11.00	

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.

ASECRETARY OF STATE 12. Names and addresses of officers and/or directors: A. DIRECTORS Chairman: Frank A. Kronauge Address; 2020 W. Alex Bell Road Dayton, Ohio 45459 Vice Chairman: David B. Marshall Address: 6024 Yarmouth Drive Dayton, Ohio 45459 Director: William Hawthorne Address: 15 Paradise Plaza #233 Sarasota, Florida 34239 Director: Address: **B. OFFICERS** President: Frank A. Kronauge Address: 2020 W. Alex Bell Road Dayton, Ohio 45459 Vice President: William Hawthorne Address: 15 Paradise Plaza #233 Sarasota, Florida 34239 Secretary: David B. Marshall Address: 6024 Yarmouth Drive, Dayton Ohio 45459 Treasurer: Frank A. Kronauge Address: 2020 W. Alex Bell Road, Dayton Ohio 45459 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, of any officer listed in number 12 of the application) 14. DOVIO B. MARSWALL VICE CWALKMAN

(Typed or printed name and capacity of person signing application)

United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show HOME ASSISTANCE NOW INCORPORATED, an Ohio not for profit corporation, Charter No. 1881953, having its principal location in Dayton, County of Montgomery, was incorporated on September 08, 2009 and is currently in GOOD STANDING upon the records of this office.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 FEB -4 P 12: 26



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 16th day of January, A.D. 2010

Ohio Secretary of State

Validation Number: V201016JA8EBF