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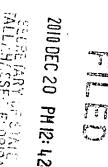
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s or status
Special Instructions to F	iling Officer:	

Office Use Only



400188825934

12/20/10--01020--029 **87.50



COVER LETTER

TO:	New Filing Sec Division of Co					
SUBJ	ECT:		ATIONAL, INCORPO on – must include suffix	ORATED		
Dear S	ir or Madam:					
"Certif	icate of Existence		t Corporation for Authorizati anding" and check are submi orida.			
Please	return all corresp	ondence concerning this ma	tter to the following:			
		SHIF	RLEY H. WIGGINS Name of Person			
		OTHERS	INTERNATIONAL, INC Firm/Company	D		
		1391 NW ST. L	LUCIE WEST BLVD., S	TE. 124		
			SAINT LUCIE, FL 34986 ty/State and Zip Code	i i	2010	
	E-ma		@gmail.com uture annual report notificati	on) (2)	2010 DEC 20	PERSONAL PROPERTY OF THE PERSONAL PROPERTY OF
For fu	ther information	concerning this matter, plea	se call:	्री है। स्वयू निर्म (1) दर्भ स्वयू कर्म	PH 12: 42	gerrana E E P
		f Person at (909) 649 Area Code & Daytime Tele	-7261 Pephone Number	42	
	MAILING AD New Filing Sect Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations	STREET/COI New Filing Sec Division of Co Clifton Buildin 2661 Executive Tallahassee, Fl	rporations ng e Center Circle		
Enclos	ed is a check for	the following amount:				
\$7	0.00 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 OTHERS INTERNATIO	NAL, INCORPORATED	
(Name of corporation: must include the word "INCORPORATE	ED" or "CORPORATION" or words or abbreviation	ns of like
import in language as will clearly indicate that it is a corporation in the name at present. "Company" or "Co." may not be used as	n instead of a natural person or partnership if not so	contained)
·	- o 101 and 11	
2. CALIFORNIA 3.	52-1960177	
(State or country under the law of which it is incorporated)	(FEI number, if applicable)	_
a 05/24/2006 5	Daretual.	
(Date of Incorporation)	(Durgtion: Year corp. will cease to exist or "perp	etual")
/ /	•	
6. N/A (Date first conducted affairs in Florida if prior to registration. See s		-14.72-12124.X
	Λ' ()	i .
7. 1391 NN ST. Lucje W	est Blul. Ste. 124. Port Stice address) He 124 Port St. Lucie mailing address)	+ Lucie, FL
(Principal of	mice address) 3	1986
1391 HW ST. Lucie West Blud. S	te 124 Port St. Lucie	EL 34986
(Current m	nailing address)	<u> </u>
COMMUNITY BENEF	IT ORGANIZATION	
(Purpose(s) of corporation authorized in home state or country		-20
(* mp****(*) ** *** **		
9. Name and street address of Florida registered agent: (P.O.	. Box NOT acceptable)	
	<u></u>	
Name: Gwendolyn Wiggins	SON THE STATE OF	0
Name: Owendoryn wiggins	_	-o []]
and the second country of the second country		
Office Address: 332 S. W. Hollyhock Court	<u> </u>	is I
	57	£2
Port Saint Lucie	_, Florida34953	
(City)	(Zip Code)	
10. Decisional annuals annuals		
 Registered agent's acceptance: Having been named as registered agent and to accept servi 	ice of process for the above stated cornoration	at the place
designated in this application, I hereby accept the appointm	nent as registered agent and agree to act in th	his capacity. I
further agree to comply with the provisions of all statutes r	elative to the proper and complete performar	ice of my duties,
and I am familiar with and accept the obligations of my po	sinon as registerea agent.	
14 . 1		

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: Alson Atkinson					
Address: 9920 Placer Street, # E, Rnacho Cucamonga, CA 9173	30				
Vice Chairman: Carmen Webster					
Address: 16571 eagle Peak Road, Riverside, CA 92504					
Director: Sheba Franklin					
Address: 2724 W. Melissa Street, San Bernardino, CA 92407					
Director: Raymond Spraggins					
Address: 4067 Harwick Street, #291, Lakewood, CA 90712					
	5. 2				
B. OFFICERS					
President: Shirley H. Wiggins	DEC 2				
Address: 101 West Mission Blvd., # 110-141, Pomona, CA 91766	₩-2 O 				
	75 Final				
Vice President: Al Moore	42				
Address: 350 Sherwood Street, Redlands, CA 92373					
Secretary: Janelle Alexander					
Address: 1125 West Victoria Street, Rialto, CA 92376					
Treasurer: Clasie Hurnes	4 0				
Address: 1.0, bol 182, Loma Linda, C	# 92354				
NOTE of necessary, you may attach an addendum to the application listing act	Man.				
(Signature of Chairman, Vice Chairman, or any officer listed in num	nber 12 of the application)				
14. Shirley H. Wiggins, President (Typed or printed name and capacity of person signing application)					

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

OTHERS INTERNATIONAL, INCORPORATED

FILE NUMBER:

C2881674

FORMATION DATE:

05/24/2006

TYPE:

DOMESTIC NONPROFIT CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.





IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 08, 2010.

DEBRA BOWEN

Secretary of State