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

Office Use Only



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COVER LETTER

TO:	New Filing S Division of C							
SUBJ	ECT:		RLDCAUS			ON		
		Name of C	Corporation – n	nust in	clude suffix			
Dear S	ir or Madam:							
"Certif	icate of Existen	tion by Foreign Not ce", or "Cerificate of on to conduct its affa	Good Standin	ig" and				
Please	return all corres	pondence concerning	g this matter to	the fo	llowing:			
				tumn l				
			Nan	ne of Pe	erson			
			Copilevitz	z & Ca	inter, LLC			
			Fin	m/Com	pany			
			·		<u>·</u>	 		
			310 W. 20th	Stree	et, Suite 300)		
				Addres	S			
			Kansas (City M	O 64108			
					Zip Code			2011
		aki	ng@cckc-la	w.con	1			
	E-n	nail address: (to be u	sed for future	annual	report notifica	ition)	AR SS	3
For fur	ther information	n concerning this mat	ter, please cal	1:			171 cm	Jacker 1
							F S A E	5 じ
		nn King of Person	at <u>(81</u> Area			2-9000 elephone Number	<u> </u>	-
	MAILING AI New Filing Se	ction	•	-7	New Filing S		S:	
	Division of Co P.O. Box 6327				Division of C Clifton Build			
	Tallahassee, F					ve Center Circle		
Enclos	ed is a check for	the following amou	nt:					
\$70	0.00 Filing Fee	\$78.75 Filing F Certificate of S			Filing Fee & d Copy	\$87.50 Filing Certificate of Certified Co	f Status &	

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.		WORLD	CAUSE	FOUNDA	TION Inc.		
(Name of import in in the na	of corpoin langua ame at p	ration: must include the word "INCO age as will clearly indicate that it is a resent. "Company" or "Co." may not	DRPORATEI corporation be used as a	" or "CORPOR instead of a natu corporate suffix	ATION" or words or ablural person or partnership to by a nonprofit corporation.	breviations of like if not so containd ion.)	ed
2.		Wyoming ntry under the law of which it is inco	3.		27-3483161		
							•
4	(-	09/17/2010 Date of Incorporation)	5		perpetual		
6.		ucted affairs in Florida if prior to regis	N/A				i
(Date II	irst condi	ucted attairs in Florida it prior to regis	tration. See se	ctions 617.1301	& 617.1302, F.S, to deter	mine penalty liabil	ity.)
7		5309 Lake Wor	th Road C	reenacres,	FL 33463		_
			(Principal of	ice address)	•		
		5309 Lake Wor	th Road G	reenacres, F	FL 33463		
			(Current ma	iling address)			•
8		See attachn	nent for P	urpose State	ment		
(Purpos	se(s) of c	See attachn corporation authorized in home state	or country to	be carried out i	n the state of Florida)		
9. Name	and stre	eet address of Florida registered a	gent: (P.O.	Box <u>NOT</u> acce	eptable)	201 TAL	
N	Name:	Robert I Preston, Sr.				LAE J	
Office A	ddress:	5311 Lake Worth Road		_		2011 JAN 3 I SECHÉTARY ALLAHASSEE	MODE OF
		Lake Worth		Florida	33463	AM 10: 01	Fi
		(City)		, Florida	33463 (Zip Code)		
10 B							
10. Reg <i>Havine h</i>	istered b <i>een na</i>	agent's acceptance: med as registered agent and to a	ccent servic	e of process fo	or the above stated cor	poration at the i	olace
designate further a	ed in th gree to	is application, I hereby accept the comply with the provisions of al ar with and accept the obligation	e appointm I statutes re	ent as register lative to the pi	ed agent and agree to coper and complete per	act in this capac	city. I
		Solut		ent'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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Chairman: Robert I. Preston Sr.		
Address: 5309 Lake Worth Road Greenacres, FL 33463	New ordinates to the company of the contract o	
Vice Chairman: Robert Andrew Preston Jr.		
Address: 5309 Lake Worth Road Greenacres, FL 33463		•
Director: Michael Lang		
Address: 5309 Lake Worth Road Greenacres, FL 33463		
Director: Joseph M. Coppola		
Address: 5309 Lake Worth Road Greenacres, FL 33463		
·	20 TA	
B. OFFICERS President: Robert I. Preston Sr.	AHE AN	
Address: 5309 Lake Worth Road Greenacres, FL 33463		1 2
Vice President:)
Address:		•
Secretary: Robert Andrew Preston Jr.		
Address: 5309 Lake Worth Road Greenacres, FL 33463		
Treasurer: Robert Andrew Preston Jr.		
Address: 5309 Lake Worth Road Greenacres, FL 33463		
NOTE: If necessary, you pray attach an addendum to the application listing additional	officers and/or directors.	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	of the application)	
14. Robert I. Preston Sr., President (Typed or printed name and capacity of person signing application)		

FEIN: 27-3483161

Statement of Charitable Purpose and Program Service Accomplishments

To provide assistance to all those in need especially those in abject poverty and those that are not able to afford life-sustaining necessities, including, but not limited to, food, water, medicine and other medical supplies. The organization may transfer resources to other 501(c)(3) organizations, after reviewing and approving that the expenditure will result in the furtherance of the organization's own exempt purpose.

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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,

WORLDCAUSE FOUNDATION

is a NonProfit Corporation

formed or qualified under the laws of Wyoming did on **September 17, 2010**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2010-000589908**.

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 17th day of January, 2011 at 2:48 PM. This certificate is assigned 009127422.



Maj Massiele Secretary of State

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Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.