

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : CORPORATION SERVICE COMPANY  
Account Number : 120000000195  
Phone : (850) 521-1000  
Fax Number : (850) 558-1515

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**FOREIGN PROFIT/NONPROFIT CORPORATION  
TPED FOUNDATION CORPORATION**

Certificate of Status	0
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# 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. TPED Foundation Corporation  
(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. California 3. 26-3829624  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/10/2008 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. 1166 NW 118th Way, Coral Springs, FL 33071  
(Principal office address)  
1440 Coral Springs Drive #316, Coral Springs FL 33071  
(Current mailing address)
8. Non-profit Benefit Corporation  
(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: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(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.

Corporation Service Company

Michele Henry

By: Michele Henry

Assistant VP

(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.

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

## A. DIRECTORS

Chairman: Raymond FrancisAddress: 1166 NW 118th Way  
Coral Springs, FL 33071

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Richardine O'BrienAddress: 50 Mirror Lake Dr.  
Mirror Lake, NH 03853Director: Tamella ViolaAddress: 6555 Powerline Rd Suite 100  
Ft Lauderdale, FL 33309

## 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. Richardine O'Brien

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Richard O'Brien Dir.

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

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TALLAHASSEE FLORIDAState of California  
Secretary of State

## CERTIFICATE OF STATUS

ENTITY NAME:

TPED FOUNDATION

FILE NUMBER: C3168778  
FORMATION DATE: 11/10/2008  
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 February 25, 2011.

DEBRA BOWEN  
Secretary of State