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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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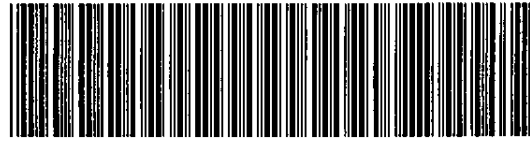
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COPILEVITZ & CANTER, LLC

ATTORNEYS AT LAW

310 W. 20TH STREET
SUITE 300
KANSAS CITY, MISSOURI 64108
(816) 472-9000 • FAX (816) 472-5000

August 2, 2011

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: **Disabled Veterans Services, Inc.**

Dear Sir or Madam:

Enclosed please find the above-referenced nonprofit corporation's Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida and the \$70 filing fee. Also enclosed is a Certificate of Existence, certified by Tennessee, which is where this organization was incorporated.

Please review this application and grant this corporation authorization to conduct affairs in Florida. Feel free to contact me should you have any questions or concerns regarding this material. Thank you in advance for your assistance.

Sincerely,



Autumn King
Legal Assistant
For the Firm
Email: aking@cckc-law.com

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Disabled Veterans Services, Inc.
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", or "Certificate of Good Standing" 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:

Autumn King

Name of Person

Copilevitz & Canter

Firm/Company

310 West 20th Street, Suite 300

Address

Kansas City, MO 64108

City/State and Zip Code

aking@cckc-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Autumn King

Name of Person

at (

816)

472-9000

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. Disabled Veterans Services, 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. Tennessee 3. 20-8493519
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 2/28/2007 5. perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. N/A
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 3200 NE 14th St. Causeway #219 Pompano Beach, FL 33062
(Principal office address)
3200 NE 14th St. Causeway #219 Pompano Beach, FL 33062
(Current mailing address)
8. See attachment for Purpose Statement
(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: Glen E Svensson

Office Address: 3200 NE 14th St. Causeway #219

Pompano Beach, Florida 33062
(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Gina Foster

Address: 3200 NE 14th St. Causeway #219 Pompano Beach, FL 33062

Director: _____

Address: _____

B. OFFICERS

President: Glen E Svensson

Address: 3200 NE 14th St. Causeway #219 Pompano Beach, FL 33062

Vice President: _____

Address: _____

Secretary: Robert Taylor

Address: 3200 NE 14th St. Causeway #219 Pompano Beach, FL 33062

Treasurer: Robert Taylor

Address: 3200 NE 14th St. Causeway #219 Pompano Beach, FL 33062

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

14. G. SVENSSON (PRESIDENT)
(Typed or printed name and capacity of person signing application)

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Disabled Veterans Services, Inc.

FEIN: 20-8493519

Statement of Charitable Purpose and Program Service Accomplishments

The purpose for which the Corporation is formed is to promote charity, education and charitable causes by assisting United States Military Veterans in their education, training, employment placement and general assimilation into civilian life.

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STATE OF TENNESSEE
Tre Hargett, Secretary of State
Division of Business Services
William R. Snodgrass Tower
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

AUTUMN KING - COPILEVITZ & CANTER

May 26, 2011

310 W. 20TH ST - STE 300
KANSAS CITY, MO 64108

Request Type: Certificate of Existence/Authorization

Request #: 0039536

Issuance Date: 05/26/2011

Copies Requested: 1

Document Receipt

Receipt #: 478997

Filing Fee: \$20.00

Payment-Check/MO - AUTUMN KING - COPILEVITZ & CANTER, KANSAS CITY, MO

\$20.00

Regarding: DISABLED VETERANS SERVICES, INC.

Filing Type: Corporation Non-Profit - Domestic

Formation/Qualification Date: 02/28/2007

Status: Active

Duration Term: Perpetual

Control #: 542593

Date Formed: 02/28/2007

Formation Locale: Wilson County

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

DISABLED VETERANS SERVICES, INC.

* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;

* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

* has filed the most recent corporation annual report required with this office;

* has appointed a registered agent and registered office in this State;

* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Tre Hargett
Secretary of State

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Processed By: Sheila Keeling