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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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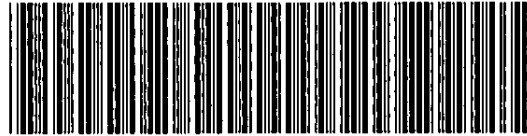
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 MAY - 7 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
5/8/12

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Secure the Call-CA, 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:

T. Michal Morgan
Name of Person

Secure the Call, CA
Firm/Company

6930 Carroll Ave.

Suite 400
Address

Takoma Park, MD 20912
City/State and Zip Code

headtreehugger@securethecall.org

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

For further information concerning this matter, please call:

Mike Morgan
Name of Person

at (301) 891-2900
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. Secure the Call-CA, 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. California 3. 20-0290749
(State or country under the law of which it is incorporated) (PEI number, if applicable)
4. October 14, 2003 5. perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. anticipating
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 6930 Carroll Ave. Suite 400, Takoma Park, MD 20912
(Principal office address)
- S/A Above
(Current mailing address)

8. Collect and distribute used cell phones to aged and domestic abuse victims.
(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)

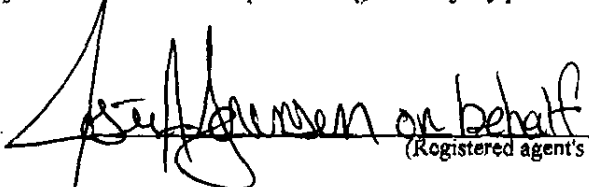
Name: INCORP Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee, Florida 33470
(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.

 on behalf of Incorp Services, Inc.
(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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Mike Morgan

Address: 6930 Carroll Ave., Takoma Park, MD 20912

Vice Chairman: _____

Address: _____

Director: Peter Oh

Address: 6930 Carroll Ave., Takoma Park, MD 20912

Director: Kirstin Nelson

Address: 6930 Carroll Ave., Takoma Park, MD 20912

B. OFFICERS

President: Mike Morgan

Address: 6930 Carroll Ave., Takoma Park, MD 20912

Vice President: _____

Address: _____

Secretary: Stanley Senders

Address: 6930 Carroll Ave., Takoma Park, MD 20912

Treasurer: _____

Address: _____

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

13. _____

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

14. _____

Mike Morgan

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

State of California
Secretary of State

CERTIFICATE OF STATUS

FILED

12 MAY -7 PM 3:40

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ENTITY NAME:

SECURE THE CALL-CA

FILE NUMBER: C2561319
FORMATION DATE: 10/14/2003
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 April 30, 2012.

Debra Bowen

DEBRA BOWEN
Secretary of State