Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H130000400873)))

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10 PH 2: 15

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323)962-8600
Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

CAHASSEE.

13|FEB 20| AH 10: 40

FOREIGN PROFIT/NONPROFIT CORPORATION ANGELS FOR HOPE INC.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

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MRA/2/13

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT. ANGELS FOR HOPE 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 Status" 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:

Tony Burroughs				
Name of Person				
Legalzoom.com, Inc.				
Firm/Company				
100 W. Broadaway Suite 100				
Address				
Glendale, CA 91210				
City/State and Zip Code				

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

For further information concerning this matter, please call:

Imelda Vasquez

_{at} 323 \ 962-8600

Name of Person

cindy@angelsforhope.org

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:

	S FOR HOPE INC.		
import in langua	ge as will clearly indicate that it is a corporati	IED" or "CORPORATION" or words or abbreviations or instead of a natural person or partnership if not so co as a corporate suffix by a nonprofit corporation.)	of like intained
2. Pennsylv	/ania	· 2	,
(State or cour	try under the law of which it is incorporated)	(FEI number, if applicable)	
4, 4/15/2005		_{5.} perpetual	
(D	Pate of Incorporation)	(Duration: Year corp. will cease to exist or "perpetu	лаl ^н)
6. (Date first condu	acted affairs in Florida if prior to registration. Se	ee sections 617.1501 & 617.1502, F.S. to determine penals	ty llability.)
7	•	· ·	
7. 100 Falls	Creek Dr., West Melbourne	Office address)	
	(Finicipal	office address)	
708 Falls	Creek Dr., West Melbourne,	, FL 32904	
	(Curren	t mailing address)	
_g To offer f	ree crochet angels to people corporation authorized in home state or countries.	e in need of hope.	
(Purpose(s) of c	corporation authorized in home state or countries	y to be carried out in the state of Florida)	
D.31 1			FILED MID: 43
9. Name and stre	et address of Florida registered agent: (P	.O. Box NOT acceptable)	田田
	Tony Gabner	7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	. 8 =
Name:	Tony Gabner		20
0.07	708 Falls Creek Dr.	_ دهر م اسم	
Office Address:			ガモり
	West Melbourne	Florida 32904	Ġ.
•	(City)	(Zip Code)	Ho: 13
	• • •	<u> </u>	,
	agent's acceptance:	mules of upperson for the above stated economical	at the place
designated in th	is application. I hereby accept the appoi	ervice of process for the above stated corporation (Intment as registered agent and agree to act in thi	is capacity. I
further agree to	comply with the provisions of all statute familiar with and accept the obligation	es relative to the proper and complete performanc	e of my
anues, ana i am	guminar wan and accept the voligation	s of my position as registered agent.	
	\sim 11.		
	Joy Labour		
	Tony Gabner (Registere	d agent's signature)	
11 Attached is	tory Cubitor	ted, not more than 90 days prior to delivery of this	application to
the Departm	nent 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.

FILED

13 FEB 20 AM 10: 43

12. Names and addresses of officers and/or directors

A. DIRECTORS	SECRETARY OF STATE. TALLAHASSEE, FLORIDA
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director: Mary Ehert Holler	
Address: PO Box 113 Protection, KS	67127
Director: Diane Dunkle	
Address: 78 Lake Daisy Blvd Winter	Haven, FL 33884
B. OFFICERS President: Cindy Gabner	
708 Falls Creek Dr West M	lelbourne, FL 32904
Vice President:	
Address:	
Secretary: Tony Gabner	
Address: 708 Falls Creek Dr West N	felbourne, FL 32904
Table Cabban	

Director:	Mary Ehert Holler
	PO Box 113 Protection, KS 67127
·	
	Diane Dunkle
Address:	78 Lake Daisy Blvd Winter Haven, FL 33884
	FICERS
Presiden	Cindy Gabner
Address:	708 Falls Creek Dr West Melbourne, FL 32904
Vice Pre	sident:
Address:	
nuuress.	
ecretan	, Tony Gabner
ddress:	708 Falls Creek Dr West Melbourne, FL 32904
	Tony Gabner
	708 Falls Creek Dr West Melbourne, FL 32904
Additess.	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	0.0 A 0
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
_{14.} <u>Ci</u>	ndy Gabner, President
	(Typed or printed name and capacity of person signing application)

FILED

13 FEB 20 AH 10: 43



SECRETARY OF STATE TALLAHASSEE, PLORMA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Cindy Gabner	, do hereby certify		
(Name)	•		
that this Resolution of the Board of Directors of ANGE	LS FOR HOPE		
that this Resolution of the Board of Directors of			
(Name of Corpora	tion)		
a corporation duly organized and existing under the laws of	Pennsylvania		
a corporation duty organized and existing under the laws of	(State or Country)		
was adopted on 02/13/2013			
was adopted on	, adopting the alternate		
ANCELS FOR HODE INC			
name of ANGELS FOR HOPE INC.			
(Alternate Name) NOTE: Must contain a corporate suffix)			
for use in Florida as its real name is unavailable in Florida.			
ماره امریت			
Date: 2 13 2613			
1 . M	President		
Signature of Chairman, Vice Chairman of the Board, a	Title of person signing		
director or any officer	Time or beison signing		

FILING FEE \$35

(No fee required if submitted with a foreign not for profit qualification or amendment)

Make checks payable to Florida Department of State and mail to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

CR2E126 (04/12)

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE FEBRUARY 13, 2013

SEB 30 MIO. 13

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

ANGELS FOR HOPE

is duly incorporated as a Pennsylvania Corporation under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth