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W13-40735

COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT. National Association of Extension 4-H Agents

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:

Jody Rosen Atkins				
Name of Person				
National Association of Extension 4-H Agents				
Firm/Company				
20423 State Road 7, Suite F6-491				
Address				
Boca Raton, Florida 33498				
City/State and Zip Code				
jrosen@associationsource.com				
E-mail address: (to be used for future annual report notification)				

For further information concerning this matter, please call:

Jody Rosen Atkins

___561 \ 477-810

Name of Person

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 19, 2013

JODY ROSEN ATKINS 20423 STATE RD 7 SUITE F6-491 BOCA RATON, FL 33498

SUBJECT: NATIONAL ASSOCIATION OF EXTENSION F-H AGENTS

Ref. Number: W13000040735

We have received your document for NATIONAL ASSOCIATION OF EXTENSION F-H AGENTS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 613A00017584

13 AUG 28 AM ID: 34 SECRETARY OF STATE

www.sunbiz.org

DO DOM COOR William - Florida 909

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. National	Association of Extension 4-H	Agents , 工n C.				
import in langu	oration: must include the word "INCORPORAT" age as will clearly indicate that it is a corporation or "Co." may not be used as	n instead of a natural perso	n or partnership if no	ations of like ot so contained		
_{2.} Marylan	Maryland (State or country under the law of which it is incorporated) (FEI number, if applicable)					
	entry under the law of which it is incorporated)	(FEI numb	er, if applicable)	<u>, </u>		
4. 3/17/1971		_{_5.} perpetual				
•	Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")				
6. NA						
(Date first cond	ducted affairs in Florida if prior to registration. See	sections 617.1501 & 617.1.	502, F.S. to determine	penalty liability.)		
7 20423 Sta	ate Road 7, Suite F6-491, Boca	Raton, Florida 33	3498			
,·		office address)				
20423 St	ate Road 7, Suite F6-491, Boca		3498			
	(Current)	nailing address)		· · · · · · · · · · · · · · · · · · ·		
				·		
_{8.} Executive	management of the volunteer-b	pased organization	1			
(Purpose(s) of	corporation authorized in home state or country	to be carried out in the stat	e of Florida)			
9. Name and str	reet address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable))			
Name:	Jody Rosen Atkins			01V25		
Office Address:	20423 State Road 7, Suite F6-4	91 		VISION OF SERVICE SERV		
	Boca Raton	_, Florida 33498		6 837		
	(City)	, 1 1011da	(Zip Code)	* 390		
Having been no designated in th further agree to	I agent's acceptance: amed as registered agent and to accept ser his application, I hereby accept the appoin o comply with the provisions of all statutes n familiar with and accept the obligations	tment as registered agen relative to the proper a	it and agree to act nd complete perfoi	ation at the ptace in this capacity. I		
	٨					

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 A. DIRECTORS Chairman: Jeff Holland Address: 665 Ryan Road, Bloomington, Indiana 47403 Vice Chairman: Pam Van Horn Address: 201 Umberger Hall ,KSU Manhattan, KS 66506-3404 Director: Debbie Nistler 2266 N. Temple Ave Starke, FL 32091-1612 Director: Tony Carrell Address: 615 W. State St. West Lafayette, IN 47907 **B. OFFICERS** President: Jeff Holland Address: 665 Ryan Road, Bloomington, Indiana 47403 Vice President: Pam Van Horn Address: 201 Umberger Hall ,KSU Manhattan, KS 66506-3404 Secretary: Jody Rosen Atkins Address: 20423 State Road 7, Suite F6-491, Boca Raton, FL 33498 Treasurer: Tony Carrell Address: 615 W. State St. West Lafayette, IN 47907 NOTE: If necessary/you may attaghan addendum to the application listing additional officers and/or directors. Vice Chairman, or any officer listed in number 12 of the application)

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

14. Jody Rosen Atkins, Secretary/Executive Director

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT NATIONAL ASSOCIATION OF EXTENSION 4-H AGENTS, INC., INCORPORATED MARCH 17, 1971, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JULY 10, 2013.

Paul B. Underson Paul B. Anderson Charter Division

301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097