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SECRETARY OF STATE SECRETARY OF CORPORATION 14 FEB -7 AM 9: 15



CORPORATION SERVICE COMPANY ACCOUNT NO. : 12000000195  $\mathbf{E}$ REFERENCE : 995476 AUTHORIZATION : COST LIMIT : \$ 70'.00 ORDER DATE: February 6, 2014 ORDER TIME : 9:05 AM ORDER NO. : 995476-010 CUSTOMER NO: 7229429 \_\_\_\_\_\_\_ FOREIGN FILINGS NAME: JILL'S HOUSE, INC. XXXX QUALIFICATION (TYPE: NP) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_\_\_ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER:

#### **COVER LETTER**

TO:	New Filing S Division of C			
SUBJ	ECT:	JlÌl's	House, Inc.	
			on - must include suffix	
Dear S	Sir or Madam:			
Affair	s in Florida", "Co	tion by Foreign Not for Profestificate of Existence", or "Cenced not for profit corporate	Certificate of Status" and cl	heck are submitted to
Please	return all corres	pondence concerning this ma	atter to the following:	
	Kelli A.	Miles, Paralegal		
		Name o	f Person	
	Holland	I & Knight, LLP		
		Firm/C	ompany	
	1600 T	ysons Blvd., Suite 700		
		Ad	dress	
	Tysons	Corner, VA 22102	nd Zip Code	<del></del>
	<b>/*</b>	•	•	
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				ationj
For fur	rther information	concerning this matter, plea	se call:	
Kelli A	A. Miles, Paraleg Name	at ( of Person	703 ) 720-8096 Area Code & Daytime Te	lephone Number
	MAILING AIR New Filing Sec Division of Cor	tion	New Filing So Division of C	orporations
	P.O. Box 6327 Tallahassee, FI	. 32314	Clifton Build 2661 Executi Tallahassee, I	ve Center Circle
Enclos	ed is a check for	the following amount:		
<b>3 \$7</b> (	0.00 Filing Fee	☐\$78.75 Filing Fee & Certificate of Status	☐\$78.75 Filing Fce & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Conv

### 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:

Ι.	Jill's House, Inc.		
- 3	(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.)	Í	
2.	Virginia 3.		
	(State or country under the law of which it is incorporated) (FEI number, if applicable)		
4.	February 12, 2003  (Date of Incorporation)  5. Perpetual  (Duration: Year corp. will cease to exist or "perpetual")		
	(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")		
6.	(Datestirst conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liabil	itv.)	
7.	9011 Leesburg Pike, Vienna, VA 22182	• •	
	(Principal office address)		
	P.O. Box 9104, McLean, VA, 22102		
	(Current mailing address)		
	Provision of respite care for disabled children and their families.  (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)		
	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	14 FEB	SECRE
	Name: Corporation Service Company	-7	OF C
Oi	ffice Address: 1201 Hays Street	2	Y OF STATE CORPUBATIONS
		جِ	ST.
	Tallahassee , Florida 32301		AFE AFE
	(City) (Zip Code)	ဘ	芸(
Hi de fu	0. Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capa wither agree to comply with the provisions of all statutes relative to the proper and complete performance of m	citv.	Ī
ш	ities, and I am familiar with and accept the obligations of my position as registered agent.		

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.

(Registered agent's signature)

Corporation Service Compan

Sue G. Knight Assistant Vice President

Α.	DIRECTORS

Chairman: Denny Harris	_
Address: P.O. Box 9104, McLean, VA, 22102	
Vice Chairman:	
Address: P.O. Box 9104, McLean, VA, 22102	
Director: Lon Solomon	
Address: P.O. Box 9104, McLean, VA, 22102	
Director, Brenda Solomon	
Address: P.O. Box 9104, McLean, VA, 22102	
B. OFFICERS	, ,
President: Cameron Doolittle	,
Address: P.O. Box 9104, McLean, VA, 22102	_
3	7
Vice President:	مِ
	U
Secretary:	
Address: P.O. Box 9104, McLean, VA, 22102	
Treasurer:	-
Address: P.O. Box 9104, McLean, VA, 22102	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14. Cameron Doolittle, President & CEO (Typed or printed name and capacity of person signing application)	

## Common brealth of Hirginia



### State Corporation Commission

### CERTIFICATE OF GOOD STANDING

### I Certify the Following from the Records of the Commission:

That Jill's House, Inc. is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is February 12, 2003;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: February 6, 2014

Joel H. Peck, Clerk of the Commission

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