

F14000001448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

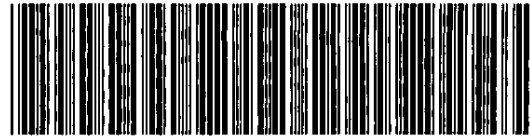
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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W14000014343



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14 MAR 26 AM 11:35

gr 4/2/14

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** SC UpLift Community Outreach  
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:

Kevin E. Wimberly

Name of Person

SC UpLift Community Outreach

Firm/Company

P.O. Box 3728

Address

Columbia, SC 29230

City/State and Zip Code

kevinwimberly@scuplift.org

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

For further information concerning this matter, please call:

Kevin E. Wimberly

Name of Person

at ( 803 ) 691-4742

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

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 5, 2014

KEVIN E. WIMBERLY  
POST OFFICE BOX 3728  
COLUMBIA, SC 29230

SUBJECT: SC UPLIFT COMMUNITY OUTREACH, INC.  
Ref. Number: W14000014343

We have received your document for SC UPLIFT COMMUNITY OUTREACH, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 014A00004846

*Spoke w/ Jessica - 3/17*

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**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. **SC UpLift Community Outreach, 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. **South Carolina**

(State or country under the law of which it is incorporated)

3. **261931708**

(FEI number, if applicable)

4. **February 8, 2008**

(Date of Incorporation)

5. **N/A Perpetual (Kew)**

(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. **6 Shadow Grey Crt. Columbia, SC 29223**

(Principal office address)

**P.O. Box 3728, Columbia, SC 29230**

(Current mailing address)

8. The purpose of SC UpLift Community Outreach is to assist economically distressed communities develop and implement comprehensive community revitalization programs that start from the grass-roots of these areas.

(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: **Barbara Singleton**

Office Address: **809 Georgia Avenue**

**Leesburg**

(City)

**Florida 34748**

(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

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**A. DIRECTORS**

Chairman: Joe Gardner

Address: 201 Clover Bay Dr.

Columbia, SC 29205

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Charlene Simmons

Address: 383 Mt. Beulah Rd

Windsor, SC 29856

Director: Claire Steverson-Smith

Address: 208 Riglaw Circle

Lexington, SC 29073

**B. OFFICERS**

President: Kevin E. Wimberly

Address: 6 Shadow Grey Crt.

Columbia, SC 29223

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

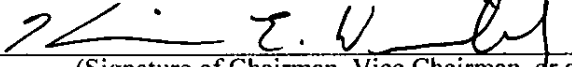
Secretary: Tammy G. Wimberly

Address: 6 Shadow Grey Crt., Columbia, SC 29223

Treasurer: Same as Secretary

Address: \_\_\_\_\_

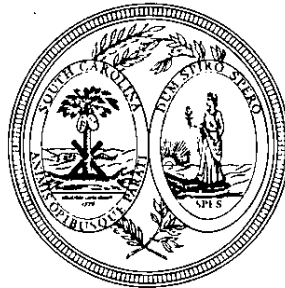
**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

14. Kevin E. Wimberly-President/CEO

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

# *The State of South Carolina*



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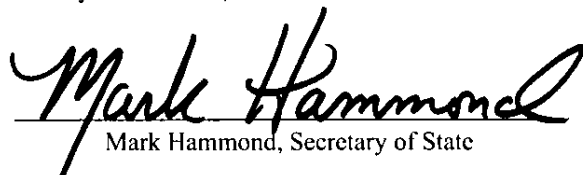
*Office of Secretary of State Mark Hammond*

## **Certificate of Existence, Non-Profit Corporation**

**I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:**

SC UPLIFT COMMUNITY OUTREACH, a Non-Profit Corporation duly organized under the laws of the State of South Carolina on February 8th, 2008, has as of the date hereof filed as a non-profit corporation for religious, educational, social, fraternal, charitable, or other eleemosynary purpose, and has paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-31-1404 of the South Carolina code and that the non-profit corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great  
Seal of the State of South Carolina this  
17th day of March, 2014.

  
Mark Hammond, Secretary of State