

KH000001788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

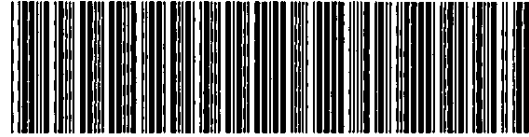
(Business Entity Name)

(Document Number)

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

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14 APR 22 PM 4:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

WK-20693

MD 4/23

## COVER LETTER

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

**SUBJECT:** The Light Of Day, 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:

Nikki L. White

Name of Person

The Light Of Day, Inc

Firm/Company

4494 Dickson Road

Address

Greenwood, Fla 32443

City/State and Zip Code

dr.nikkiwhite@yahoo.com

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

For further information concerning this matter, please call:

Nikki L. White

Name of Person

at ( 334 ) 590-3274

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

April 1, 2014

NIKKI L. WHITE  
4494 DICKSON ROAD  
GREENWOOD, FL 32443

SUBJECT: THE LIGHTS OF DAY INC.  
Ref. Number: W14000020693

We have received your document for THE LIGHTS OF DAY 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 name listed in number one of the application must be identical to the name listed in the certificate of existence.

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

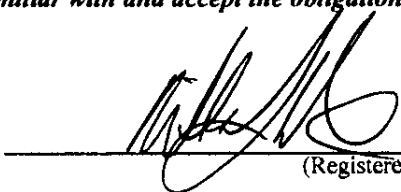
If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey  
Regulatory Specialist II

Letter Number: 814A00006922

**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. The Light Of Day 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. Alabama 3. 45-3214391  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. September 12, 2011 5. March 26, 2015  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. March 26, 2014  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 6355 Sandy Ridge Curve, Montgomery Alabama 36117  
(Principal office address)
- 4494 Dickson Road Greenwood Fla 32443  
(Current mailing address)
8. Consultant  
(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: Nikki L. White
- Office Address: 4494 Dickson Road
- Greenwood, Florida 32443  
(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.*
-   
(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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FLORIDA

12. Names and addresses of officers and/or directors

**A. DIRECTORS**

Chairman: Nikki L. White

Address: 6355 Sandy Ridge Curve, Montgomery Alabama 36117

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

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

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. OFFICERS**

President: Nikki L. White

Address: 6355 Sandy Ridge Curve, Montgomery, Alabama 36117

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

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

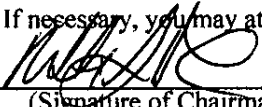
Secretary: Devon White

Address: 4488 Dickson Road, Greenwood, Florida 32443

Treasurer: Betty Crawford

Address: 4494 Dickson Road, Greenwood, Florida 32443

**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. Nikki L. White, Chairman/President

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

Jim Bennett  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

**I, Jim Bennett, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that**

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama, 1975, and upon an examination of the entity records on file in this office, the following entity name is reserved as available:

**The Light of Day Inc**

This name reservation is for the exclusive use of Dr. Nikki L. White, 4494 Dickson Road, Greenwood, FL 32443 for a period of one year beginning March 26, 2014 and expiring March 26, 2015

**In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.**



RES653077

March 26, 2014

Date

A handwritten signature in dark ink, appearing to read "Jim Bennett", is written over a horizontal line.

Jim Bennett

Secretary of State

14 APR 22 PM 4:32  
SECRETARY OF STATE  
MONTGOMERY, ALABAMA  
FILED