

F/4000002352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

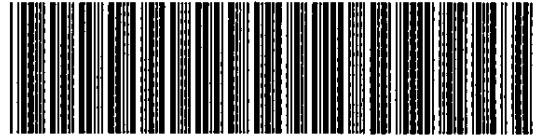
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

K 05/30/14



Whyte Hirschboeck Dudek S.C.

Kimberly C. Kirkpatrick
Direct Dial: 414-978-5349
kkirkpatrick@whdlaw.com

May 22, 2014

VIA CERTIFIED MAIL
Florida Department of State
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Application for Authority of Foreign Corporation

Dear Sir/Madam:

On behalf of our client, Majella Cares, please find enclosed a Cover Letter, together with an Application by Foreign Corporation for Authorization to Transact Business in Florida, Certificate of Fact certified by the State of Texas and a check in the amount of \$70, payable to the Florida Department of State, as required by the application.

Should you have any questions or require additional information, please contact the undersigned at 414.978.5349 or via e-mail at kkirkpatrick@whdlaw.com.

Very truly yours,

Kimberly C. Kirkpatrick
Paralegal

Enclosures

cc: Keeli Christiansen
Douglas A. Pessefall, Esq.

WHD/10414785.1

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Majella Cares

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Kim Kirkpatrick

Name of Person

Whyte Hirschboeck Dudek S.C.

Firm/Company

555 E. Wells Street, Suite 1900

Address

Milwaukee, WI 53202

City/State and Zip code

kkirkpatrick@whdlaw.com

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

For further information concerning this matter, please call:

Kim Kirkpatrick

Name of Person

at (414) 978-5349

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

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 CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. **Majella Cares, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Texas**

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

3. **32-0112866**

(FEI number, if applicable)

4. **03/31/2004**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. **n/a**

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **11615 Angus Road, Suite 102, Austin, TX 78759**

(Principal office address)

same

(Current mailing address)

8. **See attached addendum**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **CT Corporation System**

Office Address: **1200 S. Pine Island Rd.**

Plantation

(City)

, Florida **33324**

(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.

Rebecca Barth

Assistant Secretary



(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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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached addendum

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached addendum

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Brian Follett

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Brian Follett

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

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TALLAHASSEE, FLORIDA

ADDENDUM TO
APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

8. Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida.

To encourage greater respect for life through educating the public on all life issues primarily through the use of mass media.

12. Names and address of officers and/or directors.

Brian Follett
Board of Directors - President
11615 Angus Road, Ste. 102; Austin, TX 78759

Patrick Heyl
Board of Directors - Treasurer
6601 Vaught Ranch Rd. #102; Austin, TX 78730

Barbara Lyons
Board of Directors - Secretary
9730 W. Bluemound Rd. Suite 200; Milwaukee, WI 53226

James Coffey
Board of Directors - Director
150 Monument Road, Suite 609; Bala Cynwyd, PA 19004

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Office of the Secretary of State

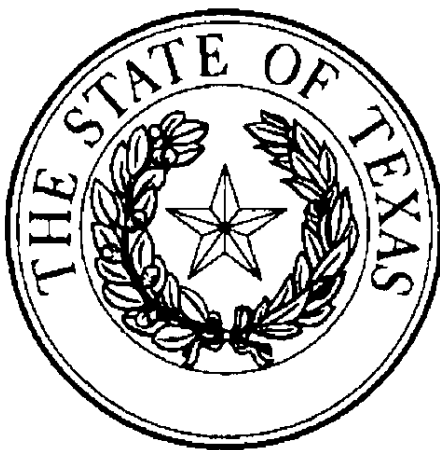
Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for Majella Cares (file number 800323885), a Domestic Nonprofit Corporation, was filed in this office on March 31, 2004.

It is further certified that the entity status in Texas is in existence.

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TALLAHASSEE, FLORIDA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 15, 2014.



NANDITA BERRY

Nandita Berry
Secretary of State