

F 14000004505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

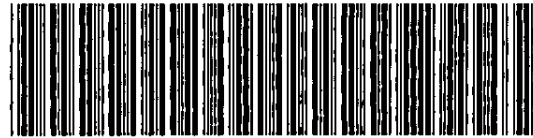
(Document Number)

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09/30/14--01013--015 **78.75

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14 OCT 22 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/24/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Southeastern Institute on Chemical Dependency, 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:

Jewell Meringer

Name of Person

SICD-FL

Firm/Company

1455 Quail Lake Drive

Address

Venice, FL 34293

City/State and Zip Code

jewell@theSICD.org

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Jewell Meringer

Name of Person

at (941) 716-6169

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

October 3, 2014

JEWELL MERINGER
1455 QUAIL LAKE DRIVE
VENICE, FL 34293

SUBJECT: SOUTHEASTERN INSTITUTE ON CHEMICAL DEPENDENCY,
INCORPPORATED
Ref. Number: W14000060429

We have received your document for SOUTHEASTERN INSTITUTE ON CHEMICAL DEPENDENCY, INCORPPORATED 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 document must contain both the street address of the principal office and the mailing address of the entity.

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: 114A00021212

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14 OCT 22 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. **Southeastern Institute on Chemical Dependency, 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.)

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

2. **Georgia, USA** 3. **27-1923491**

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

(FEI number, if applicable)

4. **February 1, 2010**

(Date of Incorporation)

5. **perpetual**

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

6. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. **425 Commercial Court, Suite 100, Venice, FL 34292**

(Principal office address)

1455 Quail Lake Drive, Venice, FL 34293

(Current mailing address)

8. **Exclusively for charitable, religious, educational and scientific purposes.**

(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: **Jewell Meringer**

Office Address: **1455 Quail Lake Drive**

Venice

(City)

Florida **34293**

(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors

A. DIRECTORS

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Chairman: _____

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Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Jewell Meringer

Address: 1455 Quail Lake Drive, Venice, FL 34293

Vice President: Maureen Sander

Address: 13455 S. McCall Road, #156; Port Charlotte, FL 33981


Secretary: Karen Cline

Address: 3411 Miller Street, Port Charlotte, FL 33981

Treasurer: Allen Meringer

Address: 1455 Quail Lake Drive, Venice, FL 32493

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

Secretary of State
Corporations Division
313 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 140915100
CONTROL NUMBER : 10008700
DATE INC/AUTH/FILED: 2/01/2010
JURISDICTION : GEORGIA
PRINT DATE : 09/15/2014
FORM NUMBER : 211

CERTIFICATE OF EXISTENCE

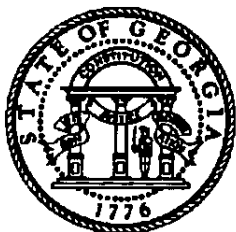
I, Brian P. Kemp, the Secretary of State of the State of Georgia,
do hereby certify under the seal of my office that

SOUTHEASTERN INSTITUTE ON CHEMICAL DEPENDENCY, INC.
A DOMESTIC NON-PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to
transact business in Georgia on the above date. Said entity is in
compliance with the applicable filing and annual registration
provisions of Title 14 of the Official Code of Georgia Annotated
and has not filed articles of dissolution, certificate of
cancellation or any other similar document with the office of the
Secretary of State.

This certificate relates only to the legal existence of the above-
named entity as of the date issued. It does not certify whether
or not a notice of intent to dissolve, an application for
withdrawal, a statement of commencement of winding up or any other
similar document has been filed or is pending with the Secretary
of State.

This certificate is issued pursuant to Title 14 of the Official
Code of Georgia Annotated and is prima-facie evidence that said
entity is in existence or is authorized to transact business in
this state.



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14 OCT 22 AM 11:55
SECRETARY OF STATE
ATLANTA, GEORGIA

B. P. Kemp

Brian P. Kemp
Secretary of State