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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

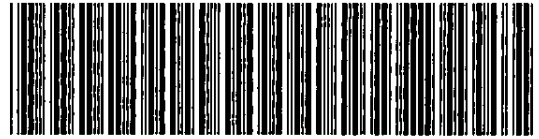
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

11/11/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: KOVA ... Keeping Our Village alive, 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:

BRENDA GIRVEN
Name of Person

KOVA ... Keeping Our Village Alive, Inc.
Firm/Company

3017 LAKE BUTTER CRT

Cape Coral, FL 33909
Address
City/State and Zip Code

DR.BRENDAGIRVEN@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRENDA GIRVEN at 404, 454-5721
Name of Person 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

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. ISDVA... Keeping Our Village Alive, 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.)

KEEPING OUR VILLAGE ALIVE, INC.

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

2. Georgia (State or country under the law of which it is incorporated) 3. 58-2272511 (FEI number, if applicable)

4. NOV. 15, 1996 (Date of Incorporation) 5. PERPETUAL (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. BRENDA GIVEN
(Principal office address)

3017 LAKE BUTLER CRT. CAPE CORAL, FL 33909
(Current mailing address)

8. Charitable Organization
(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: BRENDA GIVEN

Office Address: 3017 LAKE BUTLER CRT

CAPE CORAL, Florida 33909
(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.

Brenda Given
(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.

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: BRENDA GIRVEN

Address: 3017 LAKE BUTLER CRT
CAPE CORAL, FL. 33909

Vice Chairman: BRANDI GIRVEN

Address: 3341 ASHBURY SQ.
ATLANTA, GA. 30346

Director: _____

Address: _____

Director: _____

Address: _____

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TILLYMASHBELL, FLORIDA

B. OFFICERS

President: BRENDA GIRVEN

Address: 3017 LAKE BUTLER CRT
CAPE CORAL, FL 33909

Vice President: BRANDI GIRVEN

Address: 3341 ASHBURY SQ.
ATLANTA GA 30346

Secretary: BRYAN MCFARLIN

Address: 531 SALT LICK TRACE, PEACHTREE CITY, GA.

Treasurer: BRENDA GIRVEN

Address: 3017 LAKE BUTLER CRT. CAPE CORAL, FL 33909

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

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

14. BRENDA GIRVEN
(Typed or printed name and capacity of person signing application)

STATE OF GEORGIA

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

CONTROL NUMBER : K634702
DATE INC/AUTH/FILED: : November 15, 1996
JURISDICTION : Georgia
PRINT DATE : 07/29/2014

Brenda Girven Edwards
3341 Asbury Sqr.
Atlanta, GA 303446

CERTIFIED COPY

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that the attached documents are true and correct copies of documents maintained by the Corporations Division of the Office of the Secretary of State of Georgia under the name of

KOVA...KEEPING OUR VILLAGE ALIVE, INC.
A Domestic Non-Profit Corporation

Said entity was formed in the jurisdiction set forth above and has filed in the Office of Secretary of State on the 15th day of November, 1996 its certificate of limited partnership, articles of incorporation, articles of association, articles of organization or application for certificate of authority to transact business in Georgia. This Certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on 07/29/2014



B. P. Kemp

Brian P. Kemp
Secretary of State

STATE OF GEORGIA

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

CONTROL NUMBER : K634702
DATE INC/AUTH/FILED : November 15, 1996
JURISDICTION : Georgia
PRINT DATE : July 29, 2014

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

KOVA...KEEPING OUR VILLAGE ALIVE, 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.



A handwritten signature in black ink, appearing to read 'B: P. Kemp'.

Brian P. Kemp
Secretary of State