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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/29/14--01033--014 **78.75

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

14 NOV 12 PM 4:13

11/13

1114-59645

MD 11/13

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Child First, 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:

Chelsey Hobby or Mary Peniston
Name of Person

Child First, Inc.
Firm/Company

917 Bridgeport Avenue
Address

Shelton, CT 06484
City/State and Zip Code

finances@Childfirst.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chelsey Hobby

Mary Peniston
Name of Person

at (803) 538-5220
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

September 30, 2014

CHELSEY HOBBY
917 BRIDGEPORT AVENUE
SHELTON, CT 06484

SUBJECT: CHILD FIRST INCORPORATED
Ref. Number: W14000059645

We have received your document for CHILD FIRST INCORPORATED 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 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 brief description of the entity's nature of business must be included in the document.

List one (1) entity as the Registered Agent with the appropriate signature.

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: 214A00020898



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2014

CHELSEY HOBBY
917 BRIDGEPORT AVENUE
SHELTON, CT 06484

SUBJECT: CHILD FIRST INCORPORATED
Ref. Number: W14000059645

We have received your document for CHILD FIRST INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Verify and correct the Registered Agent section. Only one of the law firms can be listed as the Registered Agent with the proper signatures. See the attached printouts.

The Registered Agent's name must be listed as it appears in our records.

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: 214A00020898



October 21, 2014

Maryanne Dickey
Regulatory Specialist II
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: CHILD FIRST, INC. Ref. Number: W14000059645

Enclosed please find the corrected document. You requested a correction to our Registered Agent, and a Certificate of Existence. Please find them attached.

Please contact me with any questions or concerns.

Thank you

Chelsey Hobby
Finance Manager
Child First Inc
National Program Office

**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. Child First 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. Connecticut 3. 46-1272768
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 9/27/2012 5. Perpetual
(Date of Incorporation) (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. 917 Bridgeport Ave, Shelton CT 06484
(Principal office address)

Same
(Current mailing address)

8. To Replicate an Existing ^{National} home visiting ^{Model}
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

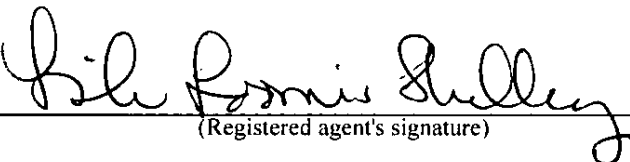
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Fowler White Boggs P.A.

Office Address: 501 E. Kennedy Blvd, STE 1700
Tampa, FL Florida 33602
(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.

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Cindy Kussin

Address: 917 Bridgeport Ave
Shelton CT 06484

Vice Chairman: Rudolph Brooks

Address: 917 Bridgeport Ave
Shelton CT 06484

Treasurer Tracy Pennoyer

Address: 917 Bridgeport Ave
Shelton CT 06484

Director: 1

Address: _____

B. OFFICERS

President: Darcy Howell, MD

Address: 917 Bridgeport Ave
Shelton CT 06484

Vice President: Mary Peniston

Address: 917 Bridgeport Ave
Shelton, CT 06484

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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

14. Tracy Pennoyer, Treasurer
(Typed or printed name and capacity of person signing application)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that the certificate of incorporation of

CHILD FIRST, INC.

a domestic NONSTOCK corporation, was filed in this office on September 27, 2012, a certificate of
dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the
records of this office such corporation is in existence.

Secretary of the State

Date Issued: October 21, 2014

11-6-11
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SECRETARY OF STATE
HALL APASSIST FLORIDA