F14000005001

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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| | | | | |
| W14-65481 | | | | |

Office Use Only



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SECRETARY OF STATE

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1/4

COVER LETTER

TO: New Filing Section Division of Corporations

U.S. Handi Capable Square Dance Association 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.

Name of Person

Please return all correspondence concerning this matter to the following:

Steven Ackerman

| | Firm/C | Company | | | _ | | |
|---|--|--------------------------|------------------------|------------|---------------------------------------|----------|-----|
| | | . •: •: | | e* r − b*° | · . | | : |
| ************* 730 0 | S W 140 Av | enue | | , | | | |
| | Ad | dress | r men e e | | _ | | |
| Miar | ni, Florida 33 ⁷ | 183 | | | •, • | | |
| | City/State a | and Zip Coo | le | | - | | |
| cpac | aller@juno.co | om | | | | | |
| • | ail address: (to be used for | | al report notifica | ation) | _ | | |
| For further information | concerning this matter, plea | se call: | | | | | |
| Steven Ack | erman at (| 305 | 663-0055 | | | | |
| Name o | f Person | Area Coo | le & Daytime Te | lephone | Number | _ | |
| MAILING ADI | | | STREET/CO | | ADDRI | ESS: | |
| Division of Corporations | | Division of Corporations | | | | | |
| P.O. Box 6327 | | | Clifton Building | | | | |
| Tallahassee, FL 32314 2661 Executive Center Tallahassee, FL 32301 | | | | Circle | | | |
| | | | i alialiassee, i | 12301 | • | | |
| Enclosed is a check for t | he following amount: | • | | | | | |
| □ \$70.00 Filing Fee | *\$78.75 Filing Fee & Certificate of Status | | Filing Fee & fied Copy | Ce | 7.50 Fili ertificate ertified (| of Statu | s & |



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 28, 2014

SEVEN ACKERMAN 7300 SW 140 AVENUE MIAMI, FL 33183

SUBJECT: U.S. HANDI CAPABLE SQUARE DANCE ASSOCIATION

Ref. Number: W14000065481

We have received your document for U.S. HANDI CAPABLE SQUARE DANCE ASSOCIATION 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 name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 914A00023088

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:

| (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting but | siness in F | lorida) | |
|--|---|---------------------------------------|--------------------|
| Alabama 3,63-1101615 | | | |
| (State or country under the law of which it is incorporated) (FEI number, if applicable | :) | | |
| June 26, 1990 _{5.} perpetual | | · · · · · · · · · · · · · · · · · · · | |
| (Date of Incorporation) (Duration: Year corp. will cease to exist | t or "perpe | tual") | |
| October 22, 2014 | | | |
| (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to detail | rmine pend | ılty liabil | ity.) |
| 7300 S W 140 Avenue Miami, Florida 33183 | | | |
| (Principal office address) | | | |
| ` ' | | | |
| 7000 0 M 440 A | | | |
| 7300 S W 140 Avenue Miami, Florida 33183 | | | |
| 7300 S W 140 Avenue Miami, Florida 33183 (Current mailing address) | | | |
| (Current mailing address) | SEO. | | |
| (Current mailing address) Square Dance Convention | SEGRE | 14 MOY | نظر |
| · | SECRETARY | 14 NOV 24 | ₹ 7.~_T |
| (Current mailing address) Square Dance Convention (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) | SECRETARY O | 14 NOV 24 F | |
| (Current mailing address) Square Dance Convention (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) | SECRETARY OF S | 14 NOV 24 PM | HILED Y |
| (Current mailing address) Square Dance Convention (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) | SECRE AGY OF STATE | PM 1: | AFRIOVEL FILED |
| (Current mailing address) Square Dance Convention (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) | SECRETARY OF STATE TALLAUSSEE. FLORIDA | 14 NOV 24 PM 1:51 | FLED |
| Square Dance Convention (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Steven Ackerman | SECRETARY OF STATE FALLAULASSEE, FLORIDA | PM 1: | FLED EL |
| (Current mailing address) Square Dance Convention (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Steven Ackerman | SECRETARY OF STATE PAIL ALL ALL SSEE. FLORIDA | PM 1: | TINOVEL TINOVEL |
| (Current mailing address) Square Dance Convention (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Steven Ackerman | SECRETARY OF STATE TALLAUSSEE. FLORIDA | PM 1: | FILED |

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.

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 | 14 NOV 24 PM 1:51 |
|---|--|
| Chairman: | SECRETARY OF STATE TALLAHASSEE FLORIDA |
| Address: | |
| Vice Chairman: | |
| Address: | |
| Director: | |
| Address: | |
| Director: | |
| Address: | |
| B. OFFICERS President: Steven Ackerman | |
| 7300 S W 140 Avenue | |
| Miami, Florida 33183 | ···· |
| Vice President: | |
| Address: | |
| Secretary: | |
| Address: | |
| Treasurer: | |
| Address: | |
| NOTE: If necessary, you may attach an addendum to the application list | <u>-</u> |
| 13. (Signature of Chairman, Vice Chairman, or any officer listed Steven Ackerman President | in number 12 of the application) |

(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

the entity records on file in this office disclose that U.S. Handi Capable Square
Dance Association was formed in Mobile County, Alabama on June 26, 1990. The
Alabama Entity Identification number for this entity is 068-415. I further certify
that the records do not disclose that said entity has been dissolved, cancelled or
terminated.

SECRETARY OF STATE



20141023000016788

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.

10/23/2014

Date

di sun

Jim Bennett

Secretary of State

ANDVEL