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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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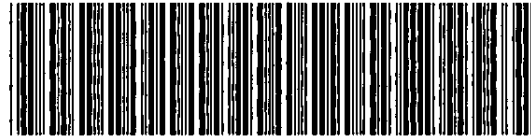
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RECEIVED
DIVISION OF REVENUE
TAXPAYER SERVICE CENTER
FALLS CHURCH, VA

RAHDERT, STEELE, REYNOLDS & DRISCOLL, P. L.
ATTORNEYS AT LAW

THE ALEXANDER BUILDING
535 CENTRAL AVENUE
ST. PETERSBURG, FLORIDA 33701-3703

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OF COUNSEL
JESSE L. SKIPPER

November 19, 2014

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

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RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RE: SHEDEV Community Outreach Center, Inc.
Application by Foreign Not for Profit Corporation for Authorization to Conduct
its Affairs in Florida

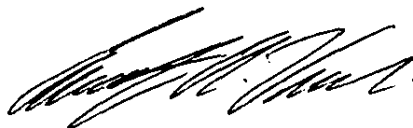
To Whom It May Concern:

Enclosed are the following for the above-referenced matter:

- 1) Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida for SHEDEV Community Outreach Center, Inc.;
- 2) Certificate of Existence issued by the State of New York for SHEDEV Community Outreach Center, Inc.; and
- 3) Check payable to Florida Department of State in the amount of \$78.75 for the filing fee and Certificate of Status.

Please return all correspondence concerning this matter to George K. Rahdert, Esq., Rahdert, Steele, Reynolds & Driscoll, P.L., 535 Central Avenue, St. Petersburg, FL 33701; sheronmsotr@aol.com. For further information concerning this matter, please call George K. Rahdert, Esq. at (727) 823-4191. Thank you in advance for your kind attention to this matter.

Sincerely,



Anthony A. Velardi

cc: Client
File

Enclosures

**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. **SHEDEV Community Outreach Center, 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. **New York**

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

3. **26-3852328**

(FEI number, if applicable)

4. **December 4, 2008**

(Date of Incorporation)

5. **Perpetual**

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

6. **Not applicable**

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

7. **1226 E. 56th Street, Brooklyn, New York 11234**

(Principal office address)

13194 US Hwy. 301 S., Suite 147, Riverview, Florida 33578

(Current mailing address)

8. *To provide educational support and charitable services to needy children, youth, and families; the elderly, poor, homeless, disabled, and other needy persons within inner city area.*
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

Name: **George K. Rahdert, Esq.**

Office Address: **535 Central Avenue**

St. Petersburg

(City)

Florida **33701**

(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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Sheron Alexis-John

Address: 11812 Gilmerton Drive

Riverview, FL 33579

Vice President: _____

Address: _____

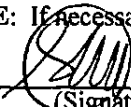
Secretary: Odessa Sylvester

Address: 742 Pawnee Street, Bethlehem, PA 18015

Treasurer: Keisha Barrow

Address: 1226 East 56th Street, Brooklyn, NY 11234

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. Sheron Alexis-John - President
(Typed or printed name and capacity of person signing application)

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of SHEDEV COMMUNITY OUTREACH CENTER, INC. was filed on 12/04/2008, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 20th day of October two
thousand and fourteen.*

Anthony Giardina

Executive Deputy Secretary of State

ATTN: ANTHONY VELARDI, RAHDERT, STEELE, REYNOLDS & DRISCOLL, P.L.
RE: RE: SHEDEV COMMUNITY OUTREAC CENTER, INC.
535 CENTRAL AVENUE
ST. PETERSBURG FL 33701

CUST REF: MAIL

Enclosed is the information you requested. Your payment of \$25.00 is hereby acknowledged.

If the name on the enclosed document(s) does not match exactly with the name of the entity you requested, this office does not have a record of the exact name you requested. The document(s) provided appear(s) to be of sufficient similarity to be the entity requested.