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W14-70380

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** LOTUS SURVIVAL FOUNDATION, NON-PROFIT CORPORATION  
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:

Christopher R. Gamber  
Name of Person

Seidel Gamber, LLC  
Firm/Company

5322 Highgate Dr - Ste 241  
Address

Durham, NC 27713  
City/State and Zip Code

GAMBER@SEIDELGAMBER.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher R. Gamber at (919) 237-3405  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 24, 2014

CHRISTOPHER R. GAMBER  
5322 HIGHGATE DR STE 241  
DURHAM, NC 27713

SUBJECT: LOTUS SURVIVAL FOUNDATION NON-PROFIT CORPORATION  
Ref. Number: W14000070390

We have received your document for LOTUS SURVIVAL FOUNDATION NON-PROFIT CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 314A00024845

**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. **LOTUS SURVIVAL FOUNDATION, ~~NON-PROFIT~~ CORPORATION**

(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.)

**LOTUS SURVIVAL FOUNDATION, INC.**

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

2. **NORTH CAROLINA**

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

3. **45-4268296**

(FEI number, if applicable)

4. **05/11/2010**

(Date of Incorporation)

5. **PERPETUAL**

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

6. **NONE**

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

7. **5322 HIGHGATE DRIVE, STE 241; DURHAM, NC 27713**

(Principal office address)

**5322 HIGHGATE DRIVE, STE 241; DURHAM, NC 27713**

(Current mailing address)

8. **Educate and support individuals living with breast cancer.**

(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: **Claudia Aguirre**

Office Address: **4455 Parkside Road**

**Davie**

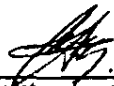
(City)

Florida **33328**

(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: Claudia Aguirre

Address: 4455 Parkside Rd  
Davie, Florida 33328

Vice Chairman: Jose Aguirre

Address: 4455 Parkside Rd  
Davie, Florida 33328

Director: Audrey Giron

Address: 2581 SW 105 Terrace  
Davie, Florida 33324

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Claudia Aguirre

Address: 4455 Parkside Rd  
Davie, Florida 33328

Vice President: Jose Aguirre

Address: 4455 Parkside Rd  
Davie, Florida 33328

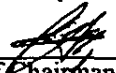
Secretary: Audrey Giron

Address: 2581 SW 105 Terrace; Davie, Florida 33324

Treasurer: Jose Aguirre

Address: 4455 Parkside Rd; Davie, Florida 33328

**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. Claudia Aguirre, President and Chairman  
(Typed or printed name and capacity of person signing application)



# NORTH CAROLINA

## Department of the Secretary of State

### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### LOTUS SURVIVAL FOUNDATION

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 11th day of May, 2010, with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

14 DEC 16 AM 9:02  
NOT RECORDED  
NOT RECORDED



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 3rd day of September, 2014.

*Elaine F. Marshall*

Secretary of State