# F15000001460

(Re	equestor's Name)				
(110	equestor 5 (varie)				
(Ac	ldress)				
(Ac	ldress)	*			
(Ci	ty/State/Zip/Phone	• #)			
PICK-UP	WAIT	MAIL			
—	<del></del>	_			
(Bu	isiness Entity Nam	ne)			
(Do	cument Number)				
Certified Copies	Certified Copies Certificates of Status				
Special Instructions to Filing Officer:					
		j			



300270188003

03/13/15--01008--007 \*\*07.50

SECRETARY OF STATES
DIVISION OF CORPORATION

Office Use Only

W15-18886

1 04/07/15



March 17, 2015

KYSHEA NICHOLAS 20 CARMODY CIRCLE COVINGTON, GA 30016

SUBJECT: PROFOUND KIDZ CAMP, INC.

Ref. Number: W15000018886

We have received your document for PROFOUND KIDZ CAMP, INC. and your check(s) totaling \$87.50. 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.

The date first transacted business in Florida within the meaning of s. 607.1501 or 605.0905, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 605.0904(7), F.S., this office is required to collect a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Accrtificate-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 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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 715A00005357

### **COVER LETTER**

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

TO:

Dear Sir or Madam:

New Filing Section
Division of Corporations

Division of Corporations

Enclosed is a check for the following amount:

□\$78.75 Filing Fee &

Certificate of Status

Tallahassee, FL 32314

P.O. Box 6327

□ \$70.00 Filing Fee

register the abov	ve referenced not for profit cor	poration to condu	ct its affairs in Florida.
Please return all	correspondence concerning th	is matter to the fo	ollowing:
-	Kyshea l	Vi cholo	<u>u</u>
-	Profound	Kidz C	amp, INC.
-			<del></del>
-	20 Carm	Address	cle '
-		tate and Zip Code	30016
_	Hnicholas E-mail address: (to be used	C bells I for future annua	outh. net Treport notification)
For further info	rmation concerning this matter	, please call:	
Kys	Name of Person	at (770) Area Code	235-2752 & Daytime Telephone Number
	NG ADDRESS: ling Section		STREET/COURIER ADDRESS: New Filing Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

\$87.50 Filing Fee,

Certified Copy

Certificate of Status &

Clifton Building

□\$78.75 Filing Fee &

Certified Copy

# APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

N COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITI REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT THE STATE OF FLORIDA:	TED TO TITS AFFAIRS IN
Drafaund Kidz Cama Tac	
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviati import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not s in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)	ons of like so contained
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business i	n Florida)
(A name unavariable in Prortia, effect alternate corporate name adopted for the purpose of transacting business i	ii ( ioitau)
State by country under the law of which it is incorporated)  3. 27-2445089  (FEI number, if applicable)	
Duration: Year corp. will cease to exist or "pe	rpetual")
Date first conducted affairs in Floridal Prior to registration. See sections 617.1501 & 617.1502, F.S. to determine p	enalty liability.)
20 Carmody Circle Covington, At. 30014	)
(Principal office address)	
Same	
(Current mailing address)	
The purpose shall be to organize exclusively for charitable (Purposets) of corporation authorized in home state or Jountry to be carried out in the state of Florida)  poor within the meaning of section 502(c)(3) of the IRS.	e purpose of 41
). Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	. 😊
Name: Pachel Clark	SECRE VISION
Office Address: 2111 62nd St. North Apt 1004	FIL FOF C
^	₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩
Clearwater Florida 33760 (Zip Code)	STA ORA
(City) (Zip Code)	25 25
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporate designated in this application, I hereby accept the appointment as registered agent and agree to act in further agree to comply with the provisions of all statutes relative to the proper and complete perforn duties, and I am familiar with and accept the obligations of my position as registered agent.	tion at the place to this capacity. I
Rachel L. Clark (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: Kushea Nicholas		
Address: 20 Carmody Cuclo		<del></del>
Coineton St. 30014		
Vice Chairman: Albetha Williams		
Address: 280 Lakeside Cirble		
Coington, St. 30014		
Director: Sharon Walker	· · · · · · · ·	
Address: 20 Cournady Cir		
Covington, MA. 30016		
Director: Everett Nicholas V		
Address: 20 Carmody Circle	<u>-</u>	SE
Covington, 12th - 30016	APR -	
B. OFFICERS	9	SAL
President: Kyshea Nicholas	뫂	) 
Address: 20 Carmady Cyclo	= -2-	- XXII 
Cowington, Mt. 30016		
Vice President: Rachel Clark		
Address: 2111 62nd St. North Apt. 1004		
Clearwater, Fl. 33760		
Secretary: Jessica Williams Regina Gray	<del></del>	
Address: 108 Farley Way, McDonough, A.A. 30253	<u> </u>	<del></del>
Treasurer: Jessi Ca Witt, ams		
Address: 280 Lakeside Circle, Covington, 194. 30014	£	
NOTE: If hecessary, you may attach an addendum to the application listing additional officers and/or direction	ctors.	
13 Surchar Thick		
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)		<del></del>
14. 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 : 14035266 DATE INC/AUTH/FILED: March 17, 2014 JURISDICTION

PRINT DATE

: Georgia

: March 30, 2015

#### CERTIFICATE OF EXISTENCE

1. Brian P. Kemp, the Secretary of State of the State of Georgia. do hereby certify under the seal of my office that

## PROFOUND KIDZ CAMP, 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.

B: 1.h

Brian P. Kemp Secretary of State