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COVER LETTER

	v Filing S ision of C	ection orporations			
CHDIECT	Spec	ial Forces Associ	ation, I	nc	
SUBJECT	•	Name of Corporati	on – must i	nclude suffix	
Dear Sir or !	Madam:				
Affairs in Fl	lorida", "C	tion by Foreign Not for Profertificate of Existence", or "Crenced not for profit corporate	Certificate o	of Status" and ch	eck are submitted to
Please return	n all corres	pondence concerning this ma	atter to the f	following:	
	Dev	wey Walker			
		_	of Person		
	Spec	al Forces Association,	NorthEas	st Florida Cha	pter 88
		Firm/C	Company		
	РО	Box 7452			
					
	•		dress		
	Jac	ksonville FL 32			
	_	City/State a	and Zip Cod	e	
	SF/	\88@comcast.	net		
	E-1	nail address: (to be used for	future annu	al report notifica	tion)
For further i	nformatio	concerning this matter, plea	se call:		
Dewe	y Wa	lker at (904	378-8079	
	Name	of Person	Area Cod	e & Daytime Te	lephone 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 F	iling Fee	□\$78.75 Filing Fee & Certificate of Status		Filing Fee & ied Copy	Section 1 \$87.50 Filing Fee, Certificate of Status & Certified Copy



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

SPECIAL FORCES ASSOCIATION

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 8th day of April, 1971, 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.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 23rd day of April, 2015.

Elaine I Marshall

Secretary of State

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. Special Forces Association, Inc.	
(Name of corporation: must include the word "INCORPORATI import in language as will clearly indicate that it is a corporatio in the name at present. "Company" or "Co." may not be used as	ED" or "CORPORATION" or words or abbreviations of like in instead of a natural person or partnership if not so contained a corporate suffix by a nonprofit corporation.)
Special Forces Association, NorthEast Fl	orida Chapter 88
(If name unavailable in Florida, enter alternate corporate name	e adopted for the purpose of transacting business in Florida)
North Carolina	50.0440400
2. North Carolina 3.	56-6148492
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
	Perpetual
(Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
_{6.} 23 April 2015	
(Date first conducted affairs in Florida if prior to registration. See	e sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
_{7.} 3769 Maddie Lane, Jacksonville FL 3	32210
	office address)
(Fincipal C	office address)
PO Box 7452, Jacksonville FL 32238	3
(Current r	mailing address)
_{8.} Military Veterans Organization; IRS 5	501 C19
8. (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.	O. Box NOT acceptable)
	<u> </u>
Name: Dewey Walker	
. 10110.	15 APR 27
Office Address: 3769 Maddie Lane	27
Jacksonville	
(City)	(Zip Code) $\mathcal{P}_{ba}(q_{L})$ ••
· · ·	⊞

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

	RECTORS		
Chairma	_{n:} Jack Tobin		
Address	PO Box 41436, Fayetteville NC 28309		
Vice Ch	airman: John Dixon		
Address	PO Box 41436, Fayetteville NC 28309		
Director	Gray Koenitzer		
	PO Box 41436, Fayetteville NC 28309		
Director	James Blanchard		
Address	PO Box 41436, Fayetteville NC 28309		
	FICERS		
	nt: Dewey Walker	<u></u>	_
Address	PO Box 7452, Jacksonville FL 32238		AP.
			27
Vice Pre	esident: Wade D Carroll	/ 11:2	3
	10539 Inverness Dr, Jacksonville FL 32257		ري نو
		23.4-1	ଶ୍ର
Secretar	_{v:} Bruce B Pastorini		
Address	4050 Havington Cir. F. Jackson illa Fl. 22246		
Treasure	David E Beeler		
Address	OZOA Tariba Orasia Dubbi, Isabasan illa El 20000		
NOTE:	: If necessary, you may attach an addendum to the application listing additional officers and/o	or direct	ors.
13.	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applica	tion)	
14 D	ewey Walker, President	tion)	
17	(Typed or printed name and capacity of person signing application)		