(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

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COVER LETTER

TO: New Filing Se Division of Co			
	FOUNDATION INC.		
SUBJECT:		on must include suffix	
Dear Sir or Madam:			
Affairs in Florida", "Ce	tion by Foreign Not for Profi ertificate of Existence", or "Cenced not for profit corporat	Certificate of Status" and ch	neck are submitted to
Please return all corresp	oondence concerning this ma	atter to the following:	
BAF	RON BERRY		
	Name o	f Person	
NEXT	20 FOUNDATION INC.		
	Firm/C	Company	
РО	BOX 1043		
	Ad	dress	
SAN	NTA ROSA BE	ACH, FL 324	59
	City/State a	nd Zip Code	
T.R.	BERRY@GM	AIL.COM	
E-n	nail address: (to be used for	future annual report notifica	ation)
For further information	concerning this matter, plea	se call:	
THERESA	BERRY at (850 687-0936	
Name (of Person	Area Code & Daytime Te	lephone Number
MAILING AE New Filing Sec Division of Co P.O. Box 6327 Tallahassee, Fl	ction rporations	New Filing So Division of C Clifton Build 2661 Executiv	orporations ing ve Center Circle
	alon Collins (on	Tallahassee, I	rL 323U1
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

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:

			or "CORPORATION" or onstead of a natural person or corporate suffix by a nonpro	•	ਂ ਲੀ	
(If name unava	lable in Florida, enter alter	nate corporate name a	dopted for the purpose of tra	nsacting business	in Fl or ida	1)
OKLAHO		3.	5-5322905	<u>.</u>	=	
MAY 8,2012			(FEI number, i PERPETUAL (Duration: Year corp. will c		PI) 12	
N/A	ate of Incorporation)		•	i i i i i i i i i i i i i i i i i i i	9	
	•	=	ctions 617.1501 & 617.1502 CH, FLORIDA 32459	F.S, to determine	penalty lia	<i>ībilit</i> y
		(Principal off	ce address)			
P.O. BOX 1	043 SANTA ROSA E	BEACH, FLORID	A 32459			
· ·		(Current ma	ling address)	_		_
SEE ATTAC	HMENT					
		me state or country to	be carried out in the state of	Florida)		
NI	et address of Florida reg	istered agent: (F.O.	Box NOT acceptable)			
Name and stre		DV				
Name and <u>stre</u> Name:	THERESA BERI	11	-			
	257 CADSON (-			
Name: _	257 CADSON (DAKS LANE	- - - _{Florida} 32459			
Name: _	357 CARSON (DAKS LANE BEACH	- , Florida 32459	Zip Code)		

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.

NEXT20 FOUNDATION INC. P.O. BOX 1043 SANTA ROSA BEACH, FLORIDA 32459

LINE 8-PURPOSE

THE ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE PURPOSES UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE

12. Names and addresses of officers and/or directors

A. DIK	RECTORS			
Chairma	BARON BERRY			
	357 CARSON OAKS LANE	*	15	
Address:	SANTA ROSA BEACH, FLORIDA 32459	;::::		
	ANN MASSEY			- -
Vice Cha	P.O. BOX 1942		-FH 12	- -
Address	SANTA ROSA BEACH, FLORIDA 32459	Notes 1	61	
D	MARGO HOLDER	***	-	
Director	200 SANDAL LANE #221			
Address:	PANAMA CITY BEACH, FLORIDA 32413			
Director				
Address				
B. OF Presiden Address:	357 CARSON OAKS LANE			
	ANN MASSEY			
Vice Pre	P.O. BOX 1942			
Address	SANTA ROSA BEACH, FLORIDA 32459			
Connector	MARGO HOLDER			
Secretary	200 SANDAL LANE #221 PANAMA CITY BEACH, FLORIDA 32413			
Address	MARGO HOLDER			
Treasure Address:	200 SANDAL LANE #221 PANAMA CITY BEACH, FLORIDA 32413			
NOTE :	: If necessary, you may attach an addendum to the application listing additional officers and			
1.5	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the appl	lication)	
14	ANN MASSEY - VICE PRESIDENT (Typed or printed name and capacity of person signing application)		-	

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC NOT FOR PROFIT CORPORATION

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that NEXT20 FOUNDATION whose registered agent is GARY SHOTTON, with its registered office at 2017 W ROCKPORT ST. BROKEN ARROW 74012 0443 USA Oklahoma is a Domestic Not For Profit Corporation duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>9th</u>, day of <u>April</u>, <u>2015</u>.

Secretary Of State