

F15000003639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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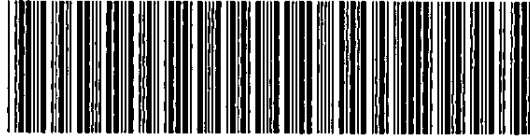
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
AUG 19 2015

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: International Society for Cow Protection Inc
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:

Lakshmi D. Dove
Name of Person

International Society for Cow Protection Inc.
Firm/Company

7010 SE 92 Terrace

Address

Gainesville Florida 32641
City/State and Zip Code

iscowp@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lakshmi D. Dove at (304) 312-7675
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

**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. International Society for Cow Protection 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. Pennsylvania 3. 23-2604082
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 19 1990 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 885 Oxen Drive, Moundsville, WV, 26041
(Principal office address)

885 Oxen Drive, Moundsville, WV, 26041
(Current mailing address)

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. Box **NOT** acceptable)

Name: Lakshmi D. Dove

Office Address: 7010 SE 92 Terrace

Gainesville, Florida 32641
(City) (Zip Code)

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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.

Lakshmi D. Dove
(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: William E Dove

Address: 885 Oxen Drive, Moundsville WV 26041

Vice Chairman: _____

Address: _____

Director: Irene M. Dove

Address: 885 Oxen Drive Moundsville WV 26041

Director: Lakshmi D. Dove

Address: ~~7010~~ 7010 SE 92 Terrace Gainesville FL 32641

B. OFFICERS

President: William E. Dove

Address: 885 Oxen Drive Moundsville WV 26041

Vice President: _____

Address: _____

Secretary: Irene M. Dove

Address: 885 Oxen Drive Moundsville WV 26041

Treasurer: Lakshmi D. Dove

Address: 7010 SE 92 Terrace Gainesville WV 26041

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. William E. Dove Irene M. Dove Lakshmi D. Dove
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Lakshmi D. Dove Treasurer
(Typed or printed name and capacity of person signing application)

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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

08/07/2015

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

INTERNATIONAL SOCIETY FOR COW PROTECTION INC.

is duly registered as a Pennsylvania Non-Profit (Non Stock) under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set
my hand and caused the Seal of the Secretary's
Office to be affixed, the day and year above written

Pedro G. Contis
Secretary of the commonwealth

Certification Number: TSC150606182761-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify.aspx>