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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

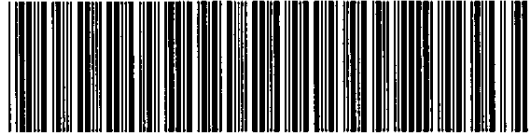
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TALLAHASSEE, FLORIDA

DEC 15 2015  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Royal Hearts of Hope International Incorporated  
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:**

Samantha Francis  
Name of Person

Royal Hearts of Hope International, Incorporated  
Firm/Company

3982 SW Bamberg St.

Port Saint Lucie, FL 34953  
Address

City/State and Zip Code

E-mail address: RHAI 4 Christ@gmail.com (to be used for future annual report notification)

**For further information concerning this matter, please call:**

Samantha Francis at (703) 629-7553  
Name of Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration 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. Royal Hearts of Hope International Incorporated  
(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. Commonwealth of Virginia  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 26, 2013 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. October 2015 - opened Bank account  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 21799 Ryan Park Terrace, Ashburn, VA 20147  
(Principal office address)

P.O. Box 9196, Port Saint Lucie, FL 34985  
(Current mailing address, if different)

8. Non-Profit Charity  
(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: Samantha Francis  
Office Address: 3982 SW Bamberg St.  
Port Saint Lucie, Florida 34953  
(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.*

[Signature]  
(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: Ms. Wanda Henry  
Address: 21729 Calamary Circle  
Sterling, VA 20164

Vice Chairman: \_\_\_\_\_

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

Director: Mr. Adolphus Butler Jr.

Address: 14383 Newbern Loop.  
Barnesville, VA 20155

Director: Ms. Joycelyn Alston

Address: 6310 Musket Ball Dr.  
Centreville, VA 20121

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**B. OFFICERS**

President: Samantha Francis

Address: 3982 SW Bamberg St.  
Port Saint Lucie, Florida 34953

Vice President: \_\_\_\_\_

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

Secretary: Deborah Cerry

Address: 21799 Ryan Park Terrace, Ashburn, VA 20147

Treasurer: \_\_\_\_\_

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

**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. Samantha Francis  
(Typed or printed name and capacity of person signing application)

# Commonwealth of Virginia



## State Corporation Commission

### CERTIFICATE OF GOOD STANDING

*I Certify the Following from the Records of the Commission:*

That Royal Hearts of Hope International is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is June 26, 2013;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:  
December 7, 2015*

*Joel H. Peck*

*Joel H. Peck, Clerk of the Commission*