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TOLSON

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: STARFISH ADVOCATES, 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:

ROBERT R. KLOSTERMEYER
Name of Person

N/A
Firm/Company

N/A

582 FALCON TRL.
Address

NICEVILLE, FL 32578-1061
City/State and Zip Code

starfishadvocates127@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT R. KLOSTERMEYER at (816) 617-6000
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**

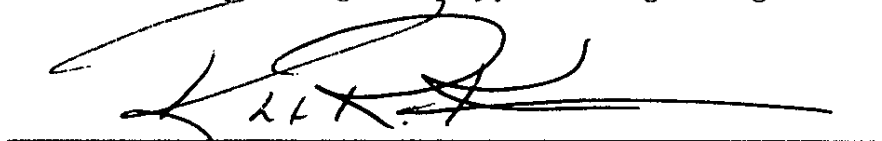
IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:

1. STARFISH ADVOCATES, 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.)
2. MISSOURI 3. 81-1622287
(State or country under the law of which it is incorporated) (FEL number, if applicable)
4. FEBRUARY 16, 2016 5. PERPETUAL
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. NO BUSINESS AFFAIRS CONDUCTED IN FLORIDA TO DATE
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 582 FALCON TRL., NICEVILLE, FL. 32578-1061
(Principal office address)
- SAME AS ABOVE
(Current mailing address)

8. ORGANIZED EXCLUSIVELY FOR CHARITABLE & RELIGIOUS PURPOSES W/IN \$500K(B)
(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: ROBERT R. KLOSTERMEYER
- Office Address: 582 FALCON TRL.
NICEVILLE, Florida 32578-1061
(City) (Zip Code)
- OF INTERNAL
REVENUE 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.


(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: ROBERT R. KLOSTERMEYER

Address: 582 FALCON TRL.
NICEVILLE, FL 32578-1061

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: ROBERT R. KLOSTERMEYER

Address: 582 FALCON TRL.
NICEVILLE, FL 32578-1061

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. [Signature]
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. ROBERT R. KLOSTERMEYER, CHAIRMAN OF DIRECTORS
(Typed or printed name and capacity of person signing application)

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CLERK OF DISTRICT COURT
NORTH DAKOTA

STATE OF MISSOURI



Jason Kander
Secretary of State

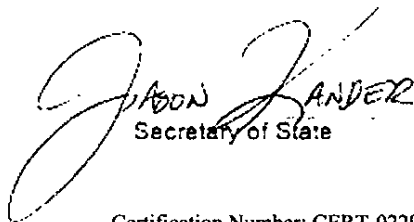
CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

STARFISH ADVOCATES, INC.
N000701072

was created under the laws of this State on the 16th day of February, 2016, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 29th day of February, 2016.


Secretary of State

Certification Number: CERT-02292016-0083



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