F16000002766

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
· (Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	•	
W16-	33949	

Office Use Only



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WIND JUN IN P 4: 2

JUN 20 2016 D. BRUCE



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 10, 2016

TOM FLEMING 123 MACFARLANE DR DELRAY BEACH, FL 33483

SUBJECT: INSTITUTE FOR CIVIC ACHIEVEMENT, INC.

Ref. Number: W16000033949

We have received your document for INSTITUTE FOR CIVIC ACHIEVEMENT, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 316A00009760

-1=

OFFICER & DIRECTOR INFO ADDED. RE-MAILED to FDOS 06/13/2014

COVER LETTER

TO:		egistration Section Pivision of Corporations				
SHRI	ECT. Institute	e for Civic Achievement,	, Inc.			
SODO	EC1	Name of Corporat	ion – must ir	clude suffix		
Dear S	Sir or Madam:					
Affair	s in Florida", "C	ation by Foreign Not for Pro ertificate of Existence", or " renced not for profit corpora	Certificate of	f Status" and cl	heck are submitted to	
Please	return all corres	spondence concerning this m	natter to the fo	ollowing:		
	Tom	Fleming				
	-,	Name	of Person			
	Institu	ute for Civic Achieveme	nt, Inc.			
	Firm/Company					
	123 N	/lacFarlane Dr.				
					- Fr. 23	
		Ac	ddress		() () () () () () () () () ()	p.c.and
	Delra	y Beach, FL 33483				h e uma
	 	City/State	and Zip Code	2		المسيح
	mains	treetguy@msn.com			29	
	E-	mail address: (to be used for	future annua	l report notific	ation)	
For fu	ther information	n concerning this matter, ple	ase call:			
Tom	Fleming	at	970	319-8964		
	Name	of Person	Area Code	Daytime Tel	lephone Number	
	MAILING AI Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations		Registration S Division of C Clifton Build	orporations ing ve Center Circle	
Enclos	ed is a check fo	r the following amount:				
5 \$70	0.00 Filing Fee	☐\$78.75 Filing Fee & Certificate of Status		Filing Fee & ed Copy	\$87.50 Filing Fe Certificate of St 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 Civic Achievement, Inc.			
import in langua	oration: must include the word "INCORPORA' age as will clearly indicate that it is a corporation or "Co." may not be used a	ion instead of a natural person or partnershi	ip if not so contained	
(If name unava	ailable in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting b	usiness in Florida)	
2. Colorado		3. 20-2955651		
(State or cou	ntry under the law of which it is incorporated)	(FEI number, if applicable)	(e)	
_{4.} June 6, 20	05	5. (not applicable)		
	Date of Incorporation)	(Date of duration, if other tha	n perpetual)	
(not applic	cable)			
(Date first cond	lucted affairs in Florida if prior to registration. Se	ee sections 617.1501 & 617.1502, F.S, to det	termine penalty liabili	ty.)
, 123 MacFa	arlane Dr., Delray Beach, FL 33483	ı		
•	(Principal	office address)		
same		·		
	(Current mailin	g address, if different)		
	community's well-being by championing it corporation authorized in home state or countreet address of Florida registered agent: (P			TO THE STATE OF TH
Office Address:	123 MacFarlane Dr		- 2 5	
	Delray Beach	, Florida 33483	_ \$20	
	(City)	(Zip Code)		
Having been na lesignated in th Turther agree to	agent's acceptance: amed as registered agent and to accept se ais application, I hereby accept the appoint o comply with the provisions of all statute in familiar with and accept the obligations (Registered	ntment as registered agent and agree : s relative to the proper and complete :	to act in this capac	citv. I
the Departn	a certificate of existence duly authenticat nent of State, by the Secretary of State or under the law of which it is incorporated.	other official having custody of corpor	very of this applica ate records in the	tion to

12. Names and addresses of officers and/or directors

A. DIRECTORS	
Chairman: THOMAS F. F. EMING, THE	
173 1000 1000	
DELRAY BEACH, FL 33483	
Vice Chairman:	
Address:	
Director:	
Address:	
Disaster.	**************************************
Director:	
Address:	
President: 140MAS F. FLEMING, TH Address: 123 MACFARLANE DR. DELRAY BEACH, FL 33483	
Vice President:	20 1
Address:	
Secretary:	
Address:	The state of the s
Treasurer:	22
NOTE: If negestary, fou may attach an addendum to the application listing at 13. (Signature of Chairman, Vice Chairman, or any officer listed in number 14.	
14. (Typed or printed name and capacity of person signing)	g application)

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

Institute for Civic Achievement, Inc.

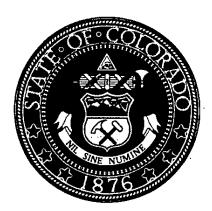
is a

Nonprofit Corporation

formed or registered on 06/06/2005 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20051222964.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 04/14/2016 that have been posted, and by documents delivered to this office electronically through 04/18/2016 @ 11:02:44.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 04/18/2016 @ 11:02:44 in accordance with applicable law. This certificate is assigned Confirmation Number 9605639



Secretary of State of the State of Colorado

Secretary of State of the State of Colorado

********End of Certificate**************************

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."