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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ChaplainUSA 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:

David Dierks
Name of Person
ChaplainUSA
Firm/Company
P.O.Box 5339
Address
Santa Monica California 90409
City/State and Zip Code
Contact@ChaplainUSA.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Dierks at (844) 733-8167
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. ChaplainUSA 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. TEXAS 3. 81-2614196
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 27OCT2015 5. Perpetual
(Date of Incorporation) (Date of duration, if other than perpetual)

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

7. 1026 Santa Clara - Brownwood TEXAS 76801
(Principal office address)

P.O.Box 5339 - Santa Monica CALIFORNIA 90409
(Current mailing address, if different)

8. Education and Support of general public and law enforcement community in times of tragedy.
(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)

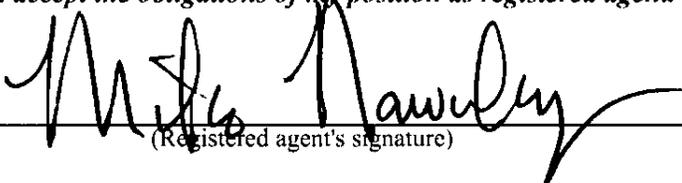
Name: Michael Nawalany

Office Address: 1880 North Congress Avenue #220
Boynton Beach, Florida 33426
(City) (Zip Code)

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TALLAHASSEE, FLORIDA

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: PHIL LECONTE
1104 WEST 7TH STREET
Address: AUSTIN TX 78703

Vice Chairman: DAVID FAIR
1026 SANTA CLARA
Address: BROWNWOOD TX 76801

Director: ANDREW TOOPES
334 SYLVN CIRCLE
Address: BOWLING GREEN KY 42101

Director: LARRY TODD
11904 HORNSBY STREET
Address: AUSTIN TX 78753

B. OFFICERS

President: PHIL LECONTE
1104 WEST 7TH STREET
Address: AUSTIN TX 78703

Vice President:
Address:

Secretary: DAVID FAIR
1026 SANTA CLARA - BROWNWOOD TX 76801
Address:

Treasurer: LARRY TODD
11904 HORNSBY STREET - AUSTIN TX 78753
Address:

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TALLAHASSEE FLORIDA

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

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

14. PHIL LECONTE - CHAIRMAN
(Typed or printed name and capacity of person signing application)

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Carlos H. Cascos
Secretary of State

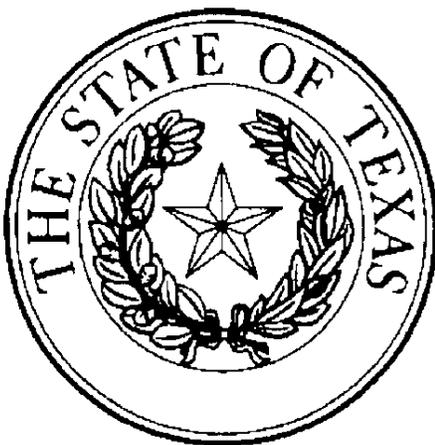
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for ChaplainUSA (file number 802319445), a Domestic Nonprofit Corporation, was filed in this office on October 27, 2015.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 09, 2016.



A handwritten signature in black ink, appearing to read "C. Cascos", followed by a horizontal line.

Carlos H. Cascos
Secretary of State

Come visit us on the internet at <http://www.sos.state.tx.us/>