

FI6000005248

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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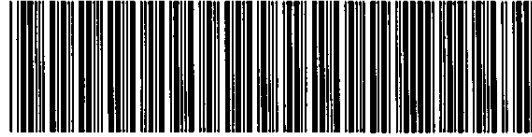
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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K. SALY  
NOV 28 2016

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sua Foundation, 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:

LeRoy D. Sua

Name of Person

Sua Foundation, Inc

Firm/Company

6067 Stoney Creek place

Address

Lakeland, Florida 33811

City/State and Zip Code

suafoundation@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LeRoy D. Sua

Name of Person

at ( 608 )

Area Code

3972748

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. Sua Foundation, 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. Wisconsin 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. December 5, 2005 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than 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. 1006 Farnam St. LaCrosse, WI 54601  
(Principal office address)

6067 Stoney Creek Place Lakeland, Florida 33811

(Current mailing address, if different)

8. A charity that offers education scholarships, community development for members of the Mano and Gio Tribes of Liberia  
(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: LeRoy D. Sua

Office Address: 6067 Stoney Creek place

Lakeland

(City)

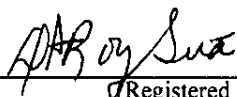
Florida 33811

(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: LeRoy D. Sua

Address: 6067 Stoney Creek place  
Lakeland, Florida 33811

Vice Chairman:

Address:

Director: THOMAS J. WEBER

Address: 1006 Farnam St.

LaCrosse, WI 54601

Director: Sydney > Sua

Address: 326 E. 35th. St.

New York, New York 10016

**B. OFFICERS**

President: LeRoy D. Sua

Address: 6067 Stoney Creek Place

Lakeland, Florida 3811

Vice President:

Address:

Secretary: Sydney K. Sua

Address: 326 E. 35th. St. New York, New York 10016

Treasurer: Graeme S. Sua

Address: 6067 Stney Creek Place Lakeland, Florida 33811

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

13. LeRoy D. Sua  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. LeRoy D. Sua (Chair/CEO)  
(Typed or printed name and capacity of person signing application)

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2016 NOV 21 PM 3:58  
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TALLAHASSEE, FLORIDA

DOM  
180 181 183

United States of America

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State of Wisconsin

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, David J. Duecker, Deputy Administrator, Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

SUA FOUNDATION, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is December 5, 2005.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120, Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed the official seal  
of the Department on November 11, 2016.

DAVID J. DUECKER, Deputy Administrator  
Division of Corporate and Consumer Services  
Department of Financial Institutions

BY: