# F17000000165

(Requestor's Name)					
(Address)					
. <b>(</b> Ad	ldress)				
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	WAIT	MAIL			
(Bu	isiness Entity Nam	e)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
	,				
·					

Office Use Only



200293028152

01/09/17--01023--004 \*\*87.50



M. MILLIGAN JAN 1 2 2017

#### **COVER LETTER**

_	tration Section ion of Corporations
SUBJECT:	American Online Giving Foundation, Inc.
20201011	Name of Corporation – must include suffix
Dear Sir or M	adam:
Affairs in Flo	"Application by Foreign Not for Profit Corporation for Authorization to Conduct its rida", "Certificate of Existence", or "Certificate of Status" and check are submitted to love referenced not for profit corporation to conduct its affairs in Florida.
Please return	all correspondence concerning this matter to the following:
	Jonathan T. McCants
	Name of Person
	Bird Loechl Brittain & McCants, LLC
	Firm/Company
•	3414 Peachtree Road, NE
	Suite 1150
	Address
	Atlanta, GA 30326
	City/State and Zip Code
	JMcCants@Birdlawfirm.com
	E-mail address: (to be used for future annual report notification)
For further in	Formation concerning this matter, please call:
	onathan T. McCants 404 264-9400 at ( )
	Name of Person at (
Regis Divisi P.O. I	LING ADDRESS: Irration Section on of Corporations Box 6327 Division of Corporations Clifton Building Division of Center Circle Tallahassee, FL 32301
Enclosed is a	check for the following amount:
□ \$70.00 Fil	ng Fee S78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status Certified Copy  S87.50 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:

(If name unay	ailable in Plorida, enter alternate corporate nam	no adopted for the purpose of transacting busin	ness in Flori	da)
	•			
2. Georgia	intry under the law of which it is incorporated)	81-0739440 (FEI number, if applicable)		<del></del>
12/03/15				
4	Date of Incorporation)	5. (Date of duration, if other than p	amatual)	
•	Sale of filosoporationy	(Date of defaulting it office that p	erpetuar <i>)</i>	
S. (Data Gret pane	lucted affairs in Florida if prior to registration, Sec		dua namalan	n-Cio
		e sections 017.1501 & 617.1502, F.S., 10 determ	ime penany i	навину.)
7. 200 Main Stre	et, Safety Harbor, FL 34695			
	(Principal	office address)		
P.O. Box 1010	), Safety Harbor, FL 34695			
	(Current mailing	address, if different)		
			-E-# -69	2017
Charitable gra	ntmaking & DAF maintenance		Marie 12	
(Purpose(s) of	corporation authorized in home state or country	to be carried out in the state of Florida)	**************************************	55
	and the complete state of the complete state	O.D. MOM. (11)		1
. Name and <u>str</u>	eet address of Florida registered agent: (P.	O, Box NOT acceptable)	ide Sales	,
	Capitol Corporate Services, Inc.		4	I'm
Name:			.ac. (27) 2-ac. (27) 2-ac. (27)	<u>.</u>
Wiffing Address.	155 Office Plaza Drive, Sutie A		3:354	CO CD
vitino vidareggi	Tallahassee	, Florida	j.	•
Ambo Audioss.	1 ULIVII UUUUU			
Miles Addiess,	(City)	(Zip Code)		
0. Registered Javing been na esignated in th urther agree to	(City)  agent's acceptance: med as registered agent and to accept ser is application, I hereby accept the appoin comply with the provisions of all statutes familiar with and accept the obligations	(Zip Code)  vice of process for the above stated corp  itment as registered agent and agree to a  s relative to the proper and complete per	ict in this c	apacity.

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: Bryan de Lottinville	ing the state of t
P.O. Box 1010 Address:	25
Safety Harbor, FL 34695	
Vice Chairman:	A
Address:	
Kathy Fields Director:	
P.O. Box 1010. Address:	
Safety Harbor, FL 34695	
David Pamenter Director:	100
P.O. Box 1010 Address:	
Safety Harbor, FL 34695	
B. OFFICERS	
President:	
P.O. Box 1010 Address:	
Safety Harbor, FL 34695	
Vice President:	
Address:	
James Pettigrew	
P.O. Box 1010, Safety Harbor, FL 34695	
David Pamenter	
P.O. Box 1010, Safety Harbor, FL 34695	
NOTE: If necessary you may attach an addendum to the application listing ac	lditional officers and/or directors.
(Signature of Chajrman, Vice Chairman, or any officer listed in nur James Pettigrew, Secretary	nber 12 of the application)

(Typed or printed name and capacity of person signing application)

Control Number: 16019112

### STATE OF GEORGIA

#### **Secretary of State**

**Corporations Division** 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530



#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

## AMERICAN ONLINE GIVING FOUNDATION; INC.

#### a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia-Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

文·诗传·诗花生 / 16 This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

> Docket Number Date Inc/Auth/Filed Jurisdiction

Print Date

Form Number

: 13764359 : 12/03/2015

: Georgia : 12/29/2016

:211



Brian P. Kemp Secretary of State