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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

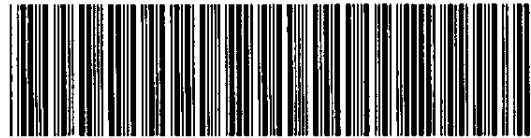
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FEB 27 2017
S. YOUNG

FILED
FEB 24 2017
17 FEB 24 PM 2:54

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MusAid 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:

Kevin Schaffler
Name of Person

MusAid Incorporated
Firm/Company

1950 Michigan Ave. - Apt. 106

Miami Beach, FL - 33139
Address

" "
City/State and Zip Code

Kevin@musaaid.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Schaffler at (812) 361-4656
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

17 FEB 21, PM 2:54
U.S. DEPT. OF COMMERCE
SECRETARY OF STATE
TALLAHASSEE, FL 32301

**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. MusAid 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. Michigan

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. December 7, 2007

(Date of Incorporation)

5. _____

(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. 1405 Thacker Avenue, Catonsville, MD 21228

(Principal office address)

1965 Alton Pointe Rd #105 Miami Beach, FL 33139

(Current mailing address, if different)

8. _____
(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: Kevin Schaffler

Office Address: 1965 Alton Pointe Rd #105 Miami Beach, FL 33139

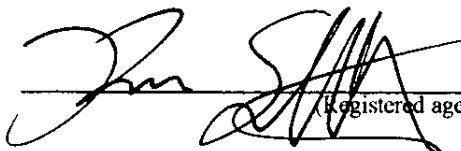
Miami Beach
(City)

Florida

33139
(Zip Code)

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: Jennifer Netburn

Address: 770P Street NW, Apt. 309
Washington, DC 20001

Vice Chairman: Tina Hadari

Address: 15 Raydon Rd. New Haven, CT 06511

Director: Kevin Schaffter

Address: 1965 Alton Rd. -Apt. 106 Miami Beach, FL 33139

Director: _____

Address: _____

B. OFFICERS

President: Kevin Schaffter

Address: 1965 Alton Rd. -Apt. 106 Miami Beach, FL 33139

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

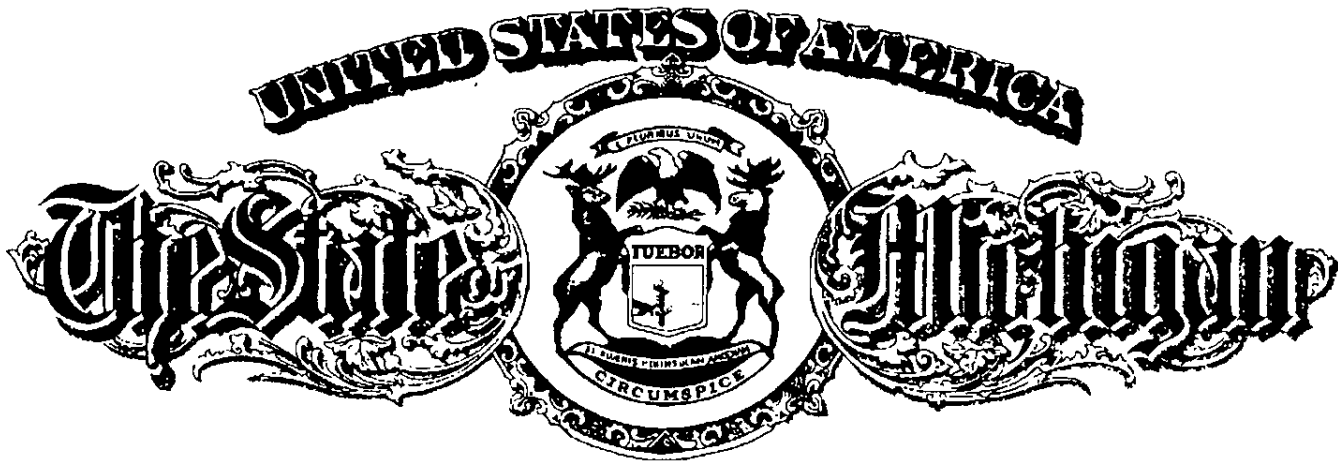
Address: _____

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FEB 26 11 2:51
OFFICE OF THE
CLERK OF THE
CITY OF MIAMI

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. Kevin Schaffter - President
(Typed or printed name and capacity of person signing application)



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

MUSAID

was validly incorporated on December 7, 2007, as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1982 PA 162, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 8th day of February, 2017.

Julia Dale

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau

17 FEB 26 PM 2:51