

F7000003912

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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FILED
JUL 31 2017
CLERK OF COURT
JUL 31 2017
JUL 31 2017

D SCOTT

AUG 29 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 8, 2017

ALVIN NOTICE
142 MABRY ST
SEBASTIAN, FL 32958

SUBJECT: TIANA ANGELIQUE NOTICE FOUNDATION/CORPORATION
Ref. Number: W17000046302

We have received your document for TIANA ANGELIQUE NOTICE FOUNDATION/CORPORATION 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 failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 917A00016088

RECEIVED
2017 AUG 28 PM 2:22
OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tiana Angelique Notice Foundation Corporation
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:

Alvin Notice

Name of Person

Tiana Angelique Notice Foundation/Corporation

Firm/Company

142 Mabry Street

Address

Sebastian, Florida 32958

City/State and Zip Code

honortiananotice@gmail.com

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

For further information concerning this matter, please call:

Alvin A. Notice

at (978)

257-1144

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**

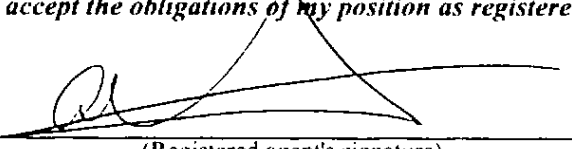
*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. Tiana Angelique Notice Foundation/Corporation
(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. Massachusetts 3. 26-4313758
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 17, 2009 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)
6. None
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 62 Overland Street, Fitchburg, MA 01420
(Principal office address)

P.O. Box 2392 Fitchburg, MA 10420
(Current mailing address, if different)
8. Domestic Violence Awareness
(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: Alvin Ainsley Notice
Office Address: 142 Mabry Street
Sebastian, Florida 32958
(City) (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

COO Colette Goguen
Chairman: _____
195 Mellen Street
Address: _____
Wincendon, MA 01475

Alvin Ainsley Notice
Vice Chairman: _____
142 Mabry Street
Address: _____
Sebastian, Florida 32958

Anna Petrisky
Director: _____
4021 Lillelikes Road
Address: _____
Wake Forest, NC 27587

Kathy Lewis
Director: _____
62 Overland Street
Address: _____
Fitchburg, MA 01420

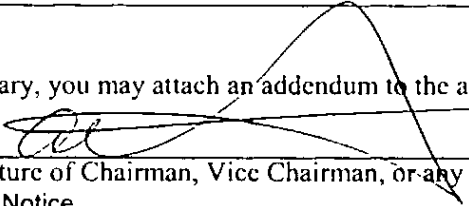
B. OFFICERS

Alvin Ainsley Notice
President: _____
142 Mabry Street
Address: _____
Sebastian, Florida 32958

Denise McDonough
Vice President: _____
20 Elliot Street
Address: _____
Canton, MA 02021

Jenna Taylor- Belanger
Secretary: _____
48 Thrd Street Leominster, MA 01453
Address: _____
Camille Clarke
Treasurer: _____
27 Redbud Way Apt. 11 Marlborough, MA 01752
Address: _____

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
Alvin Ainsley Notice
14. _____
(Typed or printed name and capacity of person signing application)



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

August 14, 2017

TO WHOM IT MAY CONCERN:

I hereby certify that

TIANA ANGELIQUE NOTICE FOUNDATION/CORPORATION

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on **February 21, 2009 (Chapter 180)**.

I also certify that so far as appears of record here, said corporation still has legal existence.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin
Secretary of the Commonwealth