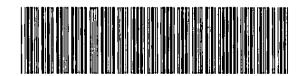
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COVER LETTER

Divisio	n of Corporations
SUBJECT. He	ritage Fountain, Inc.
SOBJECT	Name of Corporation – must include suffix
Dear Sir or Mad	am:
Affairs in Florid	pplication by Foreign Not for Profit Corporation for Authorization to Conduct its a", "Certificate of Existence", or "Certificate of Status" and check are submitted to be referenced not for profit corporation to conduct its affairs in Florida.
Please return all	correspondence concerning this matter to the following:
1	Deborah Duewson
_	Name of Person
]	deritage Fountain, Inc.
_	Firm/Company
	451 W. Cypress Creek Road #300
_	Address
Ī	Fort Lauderdale, FL 33309
-	City/State and Zip Code
d	duewson@heritagefountain.org
_	E-mail address: (to be used for future annual report notification)
For further infor	mation concerning this matter, please call:
Deborah Duewso	n 954 541-1480 at ()
	Name of Person Area Code Daytime Telephone Number
Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations c 6327 See, FL 32314 See, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a che	eck for the following amount:
□ \$70.00 Filing	Fee S78.75 Filing Fee & Certificate of Status Certified Copy 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 unava	ilable in Florida, er	nter alternate corporate nan	ne adopted for the purpose of transac	cting business in	n Florida)
New York	nter under the law o	of which it is incorporated)	3 13-3922165 (FEI number, if app	alicable)	
	·	•	•		
1)	(Date of Incorporation) 5. (Date of duration, if other than perpetual)				
N/A					
Date first cond	ucted affairs in Flori	da if prior to registration. Se	re sections 617.1501 & 617.1502, F.S.	, to determine p	enalty liabilit
1451 W. Cı	voress Creek R	Road #300, Fort Laud	terdale El 33309		
1401 11. 0	press breek t		office address)		
	·· · · · · · · · · · · · · · · · · · ·	(Current mailin	g address, if different)	···	·
		(Curtem mann)	g address, if different)		AU
والمغانيين والمحدد والمحادث			akinan ka imanana kha awalik ad lifa fa		AUG 30
Purnose(s) of	comoration authoriz	zed in home state or countr	ntions to improve the quality of life for y to be carried out in the state of Flor	r their cluzens.	
- mpose(s, o	orporation again.	ne in thome state of country	y to be carried out in the state of Tro	21	A
Name and str	eet address of Flo	rida registered agent: (P	O. Box NOT acceptable)	. O	AH II: 4:
	Registered Agen	ts Inc.		3.	Ψ
Name:					
i variic.	3030 N. Rocky F	Point Dr. STE 150A			
r varire.	3030 N. Rocky F	- 			
r varire.	3030 N. Rocky F Tampa		, Florida 33607	Code)	
r varire.		- 	, Florida <u>33607</u> (Zip	Code)	

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

Deborah Duewson Chairman:		
2851 West Prospect Road #401, Tamarac, FL 33309 Address:		
Jacqueline Eradiri		
Vice Chairman:		
244 Pennsylvania Avenue, Freeport, NY 11520 Address:		
Chaun Mack Director:		 -
700 Columbus Ave #6G, New York, NY 10025 Address:		
Jennifer Wilmoth Director:	-	
15 Lawrence Pl, Spring Valley, NY 10977 Address:		
B. OFFICERS	;·	17 A
President:	# 1 7- 1 97 # 1	AUS
Address:	7. m m -	0
	· · · · · · · · · · · · · · · · · · ·	= /-
Vice President:		9
Address:	•	
Secretary:		
Address:		
Treasurer:		
Address:	· · · · · · · · · · · · · · · · · · ·	
NOTE: If necessary, you may attach an addendum to the application list	ing additional officers and/or di	rectors.
13. Signature of Chairman, Vice Chairman, or any officer listed		
Deborah Duewson		
(Typed or printed name and capacity of person s	signing application)	

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of HERITAGE FOUNTAIN, INC. was filed on 10/31/1996, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 25th day of July two thousand and seventeen.

Brendan W. Fitzgerald Executive Deputy Secretary of State

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