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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)					
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:						
(City/State/Zip/Phone #)	(Address)					
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D. SCOTT SEP 1 8 2017 Attention: Dionne Pijeaux Division of Corporations Section Names PO Box 6327 Tallahassee, Florida 32314

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TALL AHASSEE. IL URIDA 2017 SEP cn 88

September 14, 2017

Re: National Assistance Committee

Dear Ms. Pijeaux,

Thank you in advance for reviewing our application! Sorry that the enclosed Certificate of good standing from the state of Nevada was not included initially. Please let me know if you need any additional information.

Thanks brack

Crystal Sellers

Treasurer, NAC

(404) 550-5489

csellers01@hotmail.com



COVER LETTER

TO: **Registration Section Division of Corporations** Committee œ SUBJECT 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:

rystal Sellers tance Fund National Political Assi Ste # Street 352K Address City/State and Zip Code E-mail address: (to be used for future annual report notification) aul.com For further information concerning this matter, please call: $\frac{\text{Sellers}}{\text{of Person}}$ at (404) $\frac{550}{\text{Daytime}}$ elephone Number MAILING ADDRESS: STREET/COURIER ADDRESS: -1 **Registration Section Registration Section Division of Corporations Division of Corporations** P.O. Box 6327 **Clifton Building** Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$70.00 Filing Fee	□\$78.75 Filing Fee &	□\$78.75 Filing Fee &	S \$87.50 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 617.1593, 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:

NG+CORD ASSISTCOCC CONVICE TO SECOND AND THE TO MAC 2000 (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) New Stock (C) State or country under the law of which it is incorporated) (PEI number, if applicable) Newinda 4. <u>5/15/15</u> (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 - 8-617,1502; F.S. to determine penalty hability (Correct Arren 26 Aby Cause of Control (Principal office address) 7 ACH IN SPACE (Current mailing address, if different) * Many of the business activities will be conducted in (Purposets) of portation authorized in home state or country to be carried out in the state of Floriday e of Floridan State 9. Name and street address of Florida registered agent; (P.O. Box NOT acceptable) Name: Varia Peach Bird Ste Office Address: Roach 📐 . 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. <u>ز</u> (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

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Chairman: Paula 175 11 P#7 \circ Address: \geq \sim \sim 9 , Vice Chairman: 👋 9 Address: Nenr< +c1001 Director: Address: Director:__ Address: **B. OFFICERS** mar · President: $\sim a$ Address: * Vice President: NC \sim ine Address: 01 Secretary: ave owen Address:___\ ~ • Treasurer:_(Brije Greenwoo Address: 40~ NOTE: If necessary, you may attach any addendum to the application listing additional officers and/or directors. JUNX 13.

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

Sellers treasurer (Typed or printed name and capacity of person signing application) stal 4.

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **NATIONAL ASSISTANCE COMMITTEE**, as a non-profit corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 11, 2015, and is in good standing in this state.



Electronic Certificate Certificate Number: C20170914-0223 You may verify this electronic certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 14, 2017.

Barbara K. Cegerste

Barbara K. Cegavske Secretary of State