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(City/State/Zip/Phone #)

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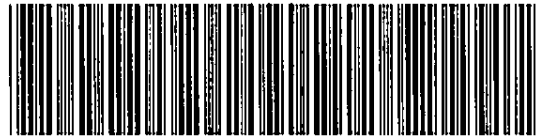
(Business Entity Name)

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TALLAHASSEE FLORIDA
COMMISSIONER OF STATE

MAY 09 2018
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOMMIES ENDURING NEONATAL DEATH DBA M.E.N.D.
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:

REBEKAH MITCHELL

Name of Person

MOMMIES ENDURING NEONATAL DEATH DBA M.E.N.D.

Firm/Company

PO BOX 631566

Address

IRVING TX 75063

City/State and Zip Code

REBEKAH@MEND.ORG

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

For further information concerning this matter, please call:

REBEKAH MITCHELL

Name of Person

at (972)
Area Code

740-7378

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:*

MOMMIES ENDURING NEONATAL DEATH INCORPORATED

1. _____
(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. TEXAS 3. 75-2670925
(State or country under the law of which it is incorporated) (FEL number, if applicable)
4. 09/24/1996 5. _____
(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 & 617.1502, F.S. to determine penalty liability.)

7. 1019 CARTHA VALLEY CT IRVING TX 75063
(Principal office address)

PO BOX 631566 IRVING TX 75063
(Current mailing address, if different)

8. M.E.N.D. ministers to bereaved mothers & families who have lost a baby to miscarriage, stillbirth or infant death.

- (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: JESSICA GADDIE
Office Address: 1200 CAMPROCK ROAD
WEST PALM BEACH, Florida 33417
(City) (Zip Code)

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TALLAHASSEE 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.


(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: _____

Address: _____

Vice Chairman: _____

Address: _____

MARILYN BROWN

Director: _____

3608 Furlong Way

Address: _____

Fort Worth TX 76244

CHERYL DAVIS

Director: _____

11804 Rodeo Dr

Address: _____

Frisco, TX 75035

B. OFFICERS

REBEKAH MITCHELL

President: _____

1019 Cartha Valley Ct

Address: _____

Irving TX 75063

DALANA BARSANTI

Vice President: _____

12241 Hedge Apple Ct

Address: _____

Fort Worth TX 76244

BYRON MITCHELL, D.D.S.

Secretary: _____

1019 Cartha Valley Ct Irving TX 75063

Address: _____

Treasurer: _____

Address: _____

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

13. Rebekah M. Mitchell

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

REBEKAH MITCHELL

14. _____

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA
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M.E.N.D. – Mommies Enduring Neonatal Death

Additional Board of Directors

Brandee Dill - Director
2105 Lookout Trail
Hurst, TX 76054

Brittney Fish - Director
832 Lariat Dr
Saginaw, TX 76131

Tina Rusert - Director
1921 Midcrest Dr
Plano, TX 75075

Calli Stanley - Director
1609 Douglas Ave
Colleyville, TX 76034

Amber Zuckerman - Director
3104 Parkline Dr
Grand Prairie TX 75052

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CLERK OF COURT
TALLAHASSEE FLORIDA

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Rolando B. Pablos
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for MOMMIES ENDURING NEONATAL DEATH (file number 141575501), a Domestic Nonprofit Corporation, was filed in this office on September 24, 1996.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 24, 2018.



A handwritten signature in black ink, appearing to read "R. Pablos".

Rolando B. Pablos
Secretary of State