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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

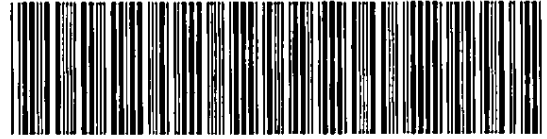
(Business Entity Name)

(Document Number)

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MAY 31 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Recirculating Farms Coalition, Inc.

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:

Marianne Cufone

Name of Person

Recirculating Farms Coalition, Inc.

Firm/Company

4522 W. Village Dr.

#145

Address

Tampa, Florida 33624

City/State and Zip Code

mcufone@recirculatingfarms.org

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

For further information concerning this matter, please call:

Marianne Cufone

Name of Person

813

at (_____)
Area Code

785-8386

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. Recirculating Farms Coalition Inc.
(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. Delaware 3. 45-244-0083
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 1, 2011 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. 5208 Magazine St., #191, New Orleans, LA 70115
(Principal office address)

4522 W. Village Dr., #145, Tampa, FL 33624
(Current mailing address, if different)

8. Public education, training and scientific testing of innovative farm techniques to improve food security and job readiness.
(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: Marianne Cufone

Office Address: 4522 W. Village Dr., #145

Tampa, Florida 33624
(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

Chairman: Anthony Griffith
6904 Merle St.
Address: New Orleans, LA 70003

Vice Chairman: _____
Address: _____

Director: Marianne Cufone
4522 W. Village Dr., #145
Address: Tampa, Florida 33624

Director: Sarajane Milder
6025 NE Kelden Place
Address: Seattle, WA 98105

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B. OFFICERS


President: Anthony Griffith
6904 Merle St
Address: New Orleans, LA 70003

Vice President: _____
Address: _____

Secretary: Marianne Cufone
13 Man O War Dr. Marathon, Fl 33050
Address: _____

Treasurer: _____
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)

14. Marianne Cufone, Secretary/Director
(Typed or printed name and capacity of person signing application)

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RECIRCULATING FARMS COALITION INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RECIRCULATING FARMS COALITION INC." WAS INCORPORATED ON THE FIRST DAY OF JUNE, A.D. 2011.



4990330 8300C

SR# 20183866003

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202712676

Date: 05-17-18