# F1800000 2581

(Re	equestor's Name)			
(Ad	ldress)			
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(Cit	ty/State/Zip/Phone	<del>:</del> #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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#### **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJ	ECT: FergusonC	ares. Inc				
00130		Name of Corporatio	n – must include suffix	<del></del>		
Dear S	Sir or Madam:					
Affair	s in Florida", "Ce	ion by Foreign Not for Profit ertificate of Existence", or "Co enced not for profit corporation	ertificate of Status" and chec	k are submitted to		
Please	return all corresp	ondence concerning this mat	ter to the following:			
	Grant Fo	erguson				
		Name of	Person			
	Ferguso	nCares nonprofit				
		Firm/Co	ompany			
	1128 Ga	erdner Rd				
		Add	ress			
	Westche	ester, 1L. 60154				
		City/State ar	id Zip Code			
	grant.fer	guson@fergusoncares.org				
	E-n	nail address: (to be used for fu	iture annual report notification	on)		
For fu	rther information	concerning this matter, pleas	e call:			
Grant	Ferguson	at (	382-4733			
	Name o	of Person /	Area Code Daytime Telep	hone Number		
	MAILING AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, FI	ction porations	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations 		
Enclos	sed is a check for	the following amount:				
<b>57</b> (	).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:

FergusonCare	s, Inc					
(Name of corpo import in langua in the name at p	ration: must include the word "INCORPORATE age as will clearly indicate that it is a corporation resent. "Company" or "Co." may not be used as	D" or "CORPORATION" or words or ablatinstead of a natural person or partnership a corporate suffix by a nonprofit corporati	oreviations if not so econ.)	of like ontained		
fcAmerica, Inc						
(If name unava	tilable in Florida, enter alternate corporate name	adopted for the purpose of transacting bus	siness in Flo	orida)		
2. Illinois						
(State or cou	(State or country under the law of which it is incorporated)  3. (FEI number, if applicable)					
4. <u>08/23/2017</u>	5.					
1)	(Date of Incorporation)  5. (Date of duration, if other than perpetual)					
08/23/2018						
(Date first cond	ucted affairs in Florida if prior to registration. See	sections 617.1501 & 617.1502, F.S. to deter	rmine penal	ıv liabil	(jy. )	
1128 Gardner	Rd, Westchester, IL, 60154					
·		ffice address)				
	(Timerparo	ince address)				
	(Current mailing a	address, if different)	_			
1) Prevention	of cruelty to children and animals. 2) Environme	ental Advocacy				
(Purpose(s) of	of cruelty to children and animals. 2) Environme corporation authorized in home state or country	to be carried out in the state of Florida)	<del></del>			
				2016		
). Name and str	eet address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	1	<b>⊒⊑</b> ?**		
		·		~		
Name:	Registered Agents Inc		13.7	త	•	
Office Address:	3030 N. Rocky Point Dr. STE 150A			क्		
	Tampa	Disside 33607	;;	PH 4:3	ζ	
	(City)	Florida 33607 (Zip Code)	- 13 <del>1</del>	 دی		
	4	(mp code)		Ċn		

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.

Bill Havre - Assistant Secretary
(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 Grant Ferguson Chairman: 1128 Gardner Rd Address: Westchester, IL, 60154 Craig Ferguson Vice Chairman: 1128 Gardner Rd Address: Westchester, IL, 60154 Tom McPheron Director:\_ 5730 N Magnolia Street Chicago, IL **B. OFFICERS** President: Grant Ferguson 1128 Gardner Rd Address: Westchester, IL, 60154 Vice President: \_\_\_\_\_ 1128 Gardner Rd Address: Westchester, IL, 60154 Tom McPheron Secretary: 5730 N Magnolia Street Chicago, IL Address:\_\_ Tom McPheron Treasurer:\_\_\_ 5730 N Magnolia Street Chicago, IL Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Grant Ferguson - chairman and president

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



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

FERGUSONCARES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON AUGUST 10, 2017, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 21ST day of MAY A.D. 2018.

Authentication #: 1814101588 verifiable until 05/21/2019
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE