F1800004623

		<u> </u>
(Re	questor's Name)	
(Ad	dress)	
(Address)		
(Ćit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(4-	-,	,
·	ocument Number)	
(12)	zumeni ivumberj	
		-
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
W18-84981		
	•	

Office Use Only



200318453482

09/20/18--01010--013 **76,75

FILE D 18 OCT -4 PH 12: 51

OCT 0 5 2018 S. YOUNG



September 22, 2018

MARGARET FINK TRANSFIGURING ADOPTION 14308 SAPPHIRE BAY CIRCLE ORLANDO, FL 32828

SUBJECT: TRANSFIGURING ADOPTION

Ref. Number: W18000084981

We have received your document for TRANSFIGURING ADOPTION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 318A00019803





COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Transfiguring Adoption NPC 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:
Margaret Fink Name of Person
Transfiguring Adoption Firm/Company 14308 Sapphire Bay Circle
14308 Sapphire Bay Circle
Orlando FL 32828 City/State and Zip Code
margie Otransfiguring adoption. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Margaret Fink at (618) 8167-2222 Name of Person Area Code 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 & □\$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status & Certified Copy 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. Transfiguring Adoption, T.K. (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like
(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 Tilionia 3 20-4153085
2. Thinois 3. 20-4153085 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. Tuly 10, 2002 5. (Date of duration, if other than perpetual)
6. Dec 1 filed Dept of Zev. Epaid taxes on soles for convention table (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 14308 Sapphire Bay Circle, Orlando FL 32828 (Principal office address)
(
(Current mailing address, if different)
(- manufacture of the manufactu
8. To engage in Charitable religious and educational functions; resource foster ? (Purpose(s) accomporation authorized in home state or country to be carried out in the state of Florida) adoptive families
9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: Darren Fink
Office Address: 14308 Sapphire Pay Circle
Orlando Florida 39898
(City) (Zip Code)
10. Registered agent's acceptance:
Office Address: 14308 Sapphire Bay Circle Orlando (City) 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 Lapacity. 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: 1/lelanie Nordstrom
Address: 1015 Cedar lene
Knoxville T/U 379/2
Vice Chairman: Eric Morris
Address: 3808 Shielingworth Court
Knoxville, TN 37921
Director: Addison Cooper
Address: 333 San Rotal St.
Redlands Ct 92373
Director: Allison Douglas
Address: 1320 Pilleaux
Knoxville, TN 37912
B. OFFICERS
President: Margaret Fink
Address: 14308 Sepphire Boy Circle
Orlando, FL 32828 Final
Vice President: Darren Fizik
Address: 14308 Sopphine Bay Circle
Orlando, FL 32828
Secretary: Addison Cooper
Address: 333 Son Refeal St, Redlands, 14 92373
Address: 1320 Pilleaux Dr., Knoxville, TN 37912
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Magazet Fine Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Margaret Fink (Typed or printed name and capacity of person signing application)
(Typed or printed name and capacity of person signing appreadon)



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

TRANSFIGURING ADOPTION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 10, 2002, 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 17TH day of SEPTEMBER A.D. 2018.

Authentication #: 1826001062 verifiable until 09/17/2019

Authenticate at: http://www.cyberdrivelllinois.com

Desse White

SECRETARY OF STATE