

F19000000857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

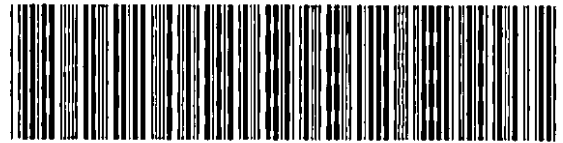
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 FEB 19 AM 8:37

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02/20/19--0100.2--010 ++70.00

ULS
2-20-19

19 FEB 19 PM 4:09

Advanced Incorporating Service

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2724
Email: orders@aisincfl.com
Website: www.aisincfl.com

NAME OF ENTITY <i>Operation BBQ Relief Inc.</i>	
	FOR OFFICE USE ONLY

PICK ONE:

☐ CERTIFIED COPY ☒ PHOTOCOPY ☐ C.U.S.

FILING:

☐ CORPORATION ☐ LLC ☐ LIMITED PARTNERSHIP ☐ GENERAL PARTNERSHIP
☐ FICTITIOUS NAME ☐ SERVICEMARK/TRADEMARK ☐ AMENDMENT
☒ FOREIGN QUALIFICATION ☐ JUDGMENT LIEN
☐ OTHER _____

RETRIEVAL:

☐ GOOD STANDING CERT/C.U.S. ☐ CERTIFIED COPY ☐ PHOTOCOPY
Of _____

APOSTILLE/CERTIFICATION REQUEST:

Country _____

Amount of Documents _____

DATE 2/19/19 TIME _____

Notes: _____

**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. Operation BBQ Relief 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. Missouri 3. 45-2442792
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. June 13, 2011 5. perpetual
(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. 15514 S. McClintock Dr., Pleasant Hill, MO 64080

(Principal office street address)

101 Briarwood Dr W., Warren, NJ 07059

(Current mailing address, if different)

8. Organized exclusively for charitable, educational, religious, or scientific purposes as per IRS Section 501C3

(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)

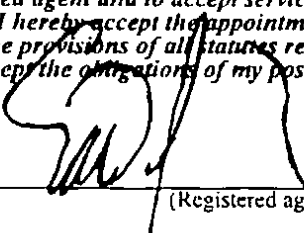
Name: Universal Registered Agents, Inc.

Office Address: 1317 California Street

Tallahassee, Florida 32304
(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.

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TALLAHASSEE, FLORIDA

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12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐ Chairman Name: Stan Hays
15514 S. McClintock Dr.
☐ Vice Chairman Address: Pleasant Hill, MO 64080
☒ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
CEO
☒ Other: ☐ Other:

☒ Chairman Name: Will Cleaver
☐ Vice Chairman Address:
☒ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
COO
☒ Other: ☐ Other:

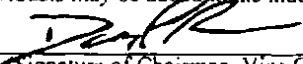
☐ Chairman Name: David P. Rosen
101 Briarwood Dr W
☐ Vice Chairman Address: Warren, NJ 07059
☒ Director
☐ President
☐ Vice President
☒ Secretary ☐ Treasurer
☐ Other: ☐ Other:

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other: ☐ Other:

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other: ☐ Other:

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other: ☐ Other:

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. David P. Rosen, Secretary
(Typed or printed name and capacity of person signing application)

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2018 FEB 19 AM 8:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

Operation BBQ Relief
N01148498

was created under the laws of this State on the 13th day of June, 2011, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 11th day of February, 2019.


Secretary of State



Certification Number: CERT-02112019-0016