

F19000002028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

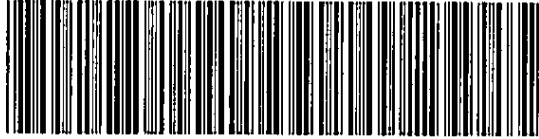
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19-20945 4/24
3/18

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FILED
2019 APR 24 PM 3:54
TALBOT COUNTY CLERK

S. PRATER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 26, 2019

INTERNATIONAL MILL BANK
CASEY WILLIAMSON
8883 S US HWY 1
PORT ST LUCIE, FL 34947

SUBJECT: IMB INC.
Ref. Number: W19000020945

2019 APR 24 PM 12:42

We have received your document for IMB INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6051.

Stacy Prather
Regulatory Specialist III

Letter Number: 419A00006028



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 8, 2019

INTERNATIONAL MILL BANK
CASEY WILLIAMSON
8883 S US HWY 1
PORT ST LUCIE, FL 34947

SUBJECT: IMB INC.
Ref. Number: W19000020945

We have received your document for IMB INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6051.

Michelle Milligan
Senior Section Administrator

Letter Number: 919A00004412



International
MilkBank
www.imilkbank.com

April 18, 2019

Stacy Prather
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SUBJECT: IMB INC.
Ref. Number: W19000020945

Dear Stacy Prather,

Thank you for enclosed Letter Number 419A00006028 in response to our application to register as a foreign corporation in the state of Florida.

We noticed that there is a typo both online under business entity search and in the aforementioned letter. Our DBA is INTERNATIONAL MILK BANK, not International Mill Bank.

The corrections requested in the enclosed letter have been amended.

- Please see the enclosed written approval and clearance of the word BANK from the Office of Financial Regulation.
- The document has been signed by our Chief Executive Officer, Glenn Snow.

We believe the document to be complete, however if you find any part is incorrect or incomplete, please do not hesitate to reach out to me via phone at (775)770-8980 or via email at cwilliamson@internationalmilkbank.com.

We are looking forward to hearing back from you and providing breast milk to babies in need in the Sunshine State.

Kind Regards,

Casey Williamson
Executive Assistant
International Milk Bank

IMB Inc. DBA International Milk Bank
8883 S Federal Highway, Port Saint Lucie, FL 34952
772-212-4880 info@imilkbank.com
www.internationalmilkbank.com

2019 APR 24 PM 12:42

FLORIDA OFFICE OF
FINANCIAL  REGULATION

www.flofr.com

April 17, 2019

Ms. Casey Williamson
8883 S. Federal Highway
Port Saint Lucie, Florida 34952

Re: International Milk Bank Inc.

Dear Ms. Williamson:

Thank you for your recent correspondence requesting approval for use of the above-referenced name.

It is the opinion of this Office that the corporate name (International Milk Bank Inc.) is definitive enough to differentiate the business being conducted from that of a commercial bank, trust company or credit union. Therefore, the Office does not object to your use of the above-referenced name being registered to conduct business in the state of Florida. However, this does not give one the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,



Jeremy W. Smith
Director
Division of Financial Institutions

JWS/jrj

cc: Lyn Shoffstall, Chief, Bureau of Commercial Recordings, Division of Corporations,
Department of State

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

IMB INC.

1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

International Milk Bank Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Nevada 3. 38-3938861

(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 11, 2014 5.

(Date of incorporation) (Date of duration, if other than perpetual)

6.

(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

8883 S US Hwy 1, Port St Lucie, FL 34952

7.

(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Robin Casey Williamson

Office Address: 8883 S US HWY 1

PORT ST LUCIE, Florida 34952 (City) (Zip code)

9. 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.

[Handwritten signature]

(Registered agent's signature)

10. 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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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: GLENN W SNOW ✓
Address: 8521 WHITE FIR ST, STE C1A
RENO, NV 89523

Vice Chairman: _____
Address: _____

Director: NORMAN A SMITH
Address: 8521 WHITE FIR ST, STE C1A
RENO, NV 89523

Director: _____
Address: _____

B. OFFICERS

President: GLENN W SNOW ✓
Address: 8521 WHITE FIR ST, STE C1A
RENO, NV 89523

Vice President: GLENN W SNOW ✓
Address: 8883 S US HWY 1
PORT ST LUCIE, FL 34952

Secretary: GLENN W SNOW ✓
Address: 8521 WHITE FIR ST, STE C1A, RENO, NV 89523

Treasurer: GLENN W SNOW
Address: 8521 WHITE FIR ST, STE C1A, RENO, NV 89523

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TULLAHASSEE, FL

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

12. 
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Glenn Snow, CEO
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE



**CERTIFICATE OF EXISTENCE
WITH STATUS IN GOOD STANDING**

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **IMB INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 11, 2014, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 13, 2019.

A handwritten signature in cursive script that reads "Barbara K. Cegavske".

Barbara K. Cegavske
Secretary of State



Electronic Certificate
Certificate Number: C20190213-0167