

To: Pa of 6
5/2/2019

5/2/2019 10:52 AM From Megha Smith

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : LEGALZOOM.COM INC.
Account Number : I20010000062
Phone : (323)962-8600
Fax Number : (323)962-3889

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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**FOREIGN PROFIT/NONPROFIT CORPORATION
SANDY PAWS RESCUE INC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SANDY PAWS RESCUE 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:

Cheyenne Moseley
Name of Person

Legalzoom.com, Inc.
Firm/Company

101 N Brand Blvd
10th Floor
Address

Glendale, CA 91203
City/State and Zip Code

Acmfh1@yahoo.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Cheyenne Moseley at (323) 962-8600
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 & 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. SANDY PAWS RESCUE 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. Massachusetts 3. 82-5520610
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/09/2018 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. 3/1/2019
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 9292 Quail Trail, Jupiter, FL 33478
(Principal office address)

(Current mailing address, if different)

8. Animal Rescue
(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: Lauren Donovan

Office Address: 9292 Quail Trail

Jupiter, Florida 33478
(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.

x Lauren Donovan
(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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12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Rose Peters

Address: 5 Nahoman St

Oak Bluffs, MA 02557

Director: _____

Address: _____

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B. OFFICERS

President: Ashley Medeiros

Address: 9292 Quail Trail

Jupiter, FL 33478

Vice President: _____

Address: _____

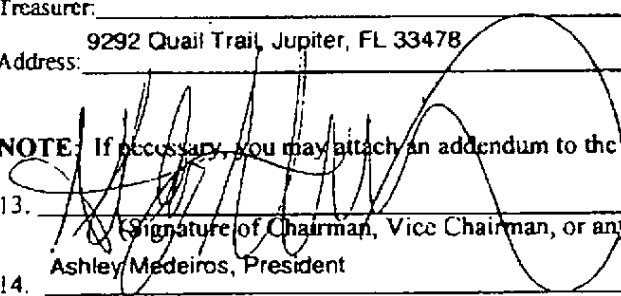
Secretary: Hannah Spillane

Address: 9292 Quail Trail, Jupiter, FL 33478

Treasurer: Michael Peters

Address: 9292 Quail Trail, Jupiter, FL 33478

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. Ashley Medeiros, President
(Typed or printed name and capacity of person signing application)



The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

April 11, 2019

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office

SANDY PAWS RESCUE INC

is a domestic corporation organized on May 9, 2018 (Chapter 180).

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 180 section 26A, for revocation of the charter of said corporation; that the State Secretary has not received notice of dissolution of the corporation pursuant to Massachusetts General Laws, Chapter 180, Section 11, 11A, or 11B; that said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

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TALLAHASSEE, FLORIDA

In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.



William Francis Galvin

Secretary of the Commonwealth