

F190000002583

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

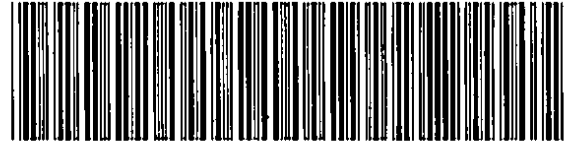
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUN 04 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 23, 2019

MICHAEL ABRAHAM
175 SW 7TH STREET., UNIT 1615
MIAMI, FL 33130

SUBJECT: THETA TAU
Ref. Number: W19000014817

We have received your document for THETA TAU and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

- ✓ The registered agent must sign accepting the designation.
- ✓ 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) 245-6052.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 119A00010504



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 15, 2019

MICHAEL ABRAHAM
175 SW 7TH STREET., UNIT 1615
MIAMI, FL 33130

SUBJECT: THETA TAU
Ref. Number: W19000014817

We have received your document for THETA TAU and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

- 1) ✓ Remove the word "INCORPORATED" from line #1. On the alternate name line, place the name exactly how it is on the certificate of existence, along with a corporate suffix ✓ 2)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned. ✓ 3

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 419A00009847

2

5/20/19.

Please see enclosed

RECEIVED

MAY 22 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Theta Tau Incorporated
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:

Michael Abraham

Name of Person

Theta Tau Central Office

Firm/Company

175 SW 7th Street

Suite 1615

Address

Miami, FL 33130

City/State and Zip Code

central.office@thetatau.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Abraham

Name of Person

512

Area Code

472-1904

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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. Theta Tau

(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.)

Theta Tau Incorporated

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

2. Missouri

(State or country under the law of which it is incorporated)

3. 43-0765719

(FEI number, if applicable)

4. June 7, 1977

(Date of Incorporation)

5. perpetual

(Date of duration, if other than perpetual)

6. April 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. 175 SW 7th Street, Suite 1615, Miami, FL, 33130

(Principal office street address)

(Current mailing address, if different)

8. operate administrative/central office to provide service and support for a national membership organization

(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: Michael Abraham

Office Address: 175 SW 7th Street, Suite 1615

Miami


(City)

Florida 33130

(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.

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: Janey K. Vann
☐ Vice Chairman Address: 175 SW 7th Street, Suite 1615
☐ Director Miami, FL, 33130
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Stuart Kardian
☐ Vice Chairman Address: 175 SW 7th Street, Suite 1615
☐ Director Miami, FL, 33130
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

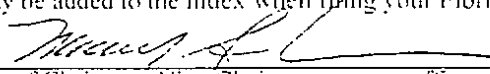
☐ Chairman Name: Holly Collins
☐ Vice Chairman Address: 175 SW 7th Street, Suite 1615
☐ Director Miami, FL, 33130
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Sagid El-hillali
☐ Vice Chairman Address: 175 SW 7th Street, Suite 1615
☐ Director Miami, FL, 33130
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Michael Abraham
☐ Vice Chairman Address: 175 SW 7th Street, Suite 1615
☒ Director Miami, FL, 33130
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Assistant Secretary ☐ 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. Michael Abraham, Assistant Secretary
(Typed or printed name and capacity of person signing application)

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

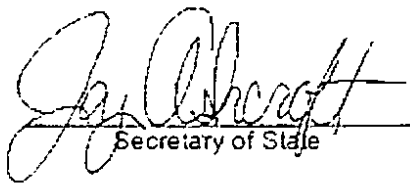
CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

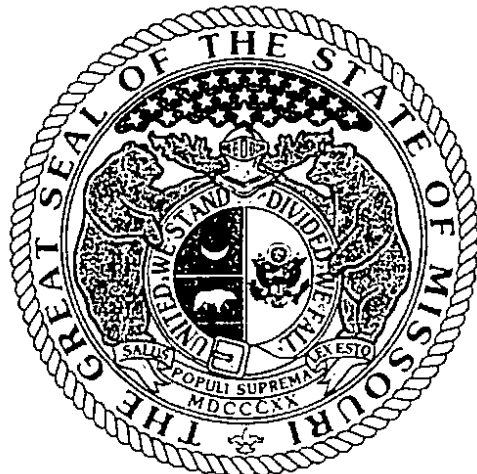
I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

THETA TAU
N00019555

was created under the laws of this State on the 7th day of June, 1977, 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 8th day of May, 2019.


Secretary of State



Certification Number: CERT-05082019-0065