FIGUES 3

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
suffix		
IWI9MMX	54101	

Office Use Only

600327216686

04/05/19--01013--003 **87.50

FILED
2019 JUN 28 PH 4: 14
SECRETARY OF STATE
ALLAHASSES

ì

Y SCOTT
JUL 1 0 2019





June 18, 2019

NICOLE SHERRILL-CORRY 1801 NE 123RD STREET, STE 314 MIAMI, FL 33181

SUBJECT: WOMEN EMBRACING EXCELLENCE

Ref. Number: W19000035969

We have received your document for WOMEN EMBRACING EXCELLENCE and your check(s) totaling \$87.50. 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.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Brooke N Kinsey Regulatory Specialist II

Letter Number: 719A00012202

RECEIVED



April 29, 2019

NICOLE SHERRILL-CORRY 1801 NE 123RD STREET, STE 314 MIAMI, FL 33181

SUBJECT: WOMEN EMBRACING EXCELLENCE

Ref. Number: W19000035969

We have received your document for WOMEN EMBRACING EXCELLENCE and your check(s) totaling \$. 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.

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.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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: 319A00008533

RECEIVED
JUN 1 7 2019

COVER LETTER

TO:	Registration Section Division of Corporations					
CEDI	JECT: Women Embracing Excellence					
SUBJ	Name of Corpo	oration – must ii	nelude suffix			
Dear S	Sir or Madam:					
Affair	nclosed "Application by Foreign Not for Is in Florida", "Certificate of Existence", or the above referenced not for profit corp	or "Certificate o	f Status" and che	eck are submitted to		
Please	return all correspondence concerning thi	s matter to the f	ollowing:	FIL 2019 JUN 28 SECRETARY TALLAHASSE		
	Nicole Sherrill-Corry					
	Na	me of Person		28 L		
	Women Embracing Excellence			mog P III		
	Fi	rm/Company		GIATE LORIDA		
	1801 NE 123rd Street			Dmi F		
	Suite 314					
		Address				
	Miami, FL 33181					
	City/St	ate and Zip Cod	e			
	drnicolescorry@gmail.com					
	E-mail address: (to be used	for future annu	al report notifica	tion)		
For fu	rther information concerning this matter,	please call:				
Nicole	e Sherrill-Corry	754 at (300-3503			
	Name of Person	Area Code	Daytime Tele	ephone 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			
Please	sed is a check for the following amount: make check payable to: FLORIDA DEPAR' 70.00 Filing Fee S78.75 Filing Fee Certificate of Stat	& 🗆 \$78.75	ATE Filing Fee & fied 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.	racing Excellence					
(Name of corport in languing the name at page)	oration: must inclinage as will clearly present. "Compan	ide the word "INCo indicate that it is a y" or "Co." may no	ORPORATED" or " a corporation instead a to used as a corpo	CORPORATION" or we lof a natural person or prate suffix by a nonprofi	ords or abbreviations of partnership if not so co t corporation.)	of like ntained
Women Embra	eing Excellence.	NC				
(If name unav	ailable in Florida.	enter alternate cor	porate name adopted	for the purpose of trans	sacting business in Flo	rida)
2. North Carolii	12		₂ 47-3115	332		₹
(State or cou	intry under the lay	of which it is inco	orporated)	(FEI number, if a	applicable)	
4. 8/27/2015			5			
(1	Date of Incorpora	ion)		(Date of duration, if of	other than perpetual)	.
				617.1501 & 617.1502, F		
		_		017,1301 & 017,1302, F.	.s, to determine pendity	· uamuţy,)
7. 1801 NE 123r	d Street, Suite 31-	Miami, FL 33181			<u> </u>	
		(Pr	rincipal office street	address)	OI9 JUN SECRET	- n
		(Curr	ent mailing address,	il different)	五門 麦	
		(0.2.2.		,	ARY ASSE	<u> </u>
Son Attached					<u>in</u> ë ⊅	i i i
8. See Attached (Purpose(s) of	corporation autho	rized in home state	or country to be car	ried out in the state of F	OF STATE TORIO	
(i dipose(s) or	emperation dunie	ind in innie saac	. 0, 0001111 10 00 0111	i jed out in the balle of t	PATE -	
9. Name and str	eet address of F	lorida registered :	agent: (P.O. Box 💆	IOT acceptable)	P P	
Name	Nicole Sherrill-C	Corry				
Office Address:	1801 NE 123rd	Corry Street, Suite 314		· · · · · · · · · · · · · · · · · · ·		
	Miami		, Flor	ida ³³¹⁸¹ (Zip Code		
		(City)		(Zip Code	<u>:)</u>	
10 D. 14	J					
	l agent's accept uned as register		accept service of p	rocess for the above s	stated corporation a	t the place
designated in th	us application.	l hereby accept ti	he appointment as	registered agent and	agree to act in this	canacity. I
jurtner agree to and I am famili	o comply with the iar with and acc	e provisions of a ept the obligation	u statutes retative ns of my position o	to the proper and con is registered agent.	npiete perjormance	oj my aunes,
Ž	1.		1.	C C		
	1//	8 AN	<i>)</i> .	<i>+</i>		
	1/1/\10	H VV	X Nicola	Sherrill-Com	z trunder t	Executive

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.

(Registered agent's signature)

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

A. DIRECTOR			67. 11.
□Chairman	Name: Nicole Sherrill-Corry	□Chairman	Name: Sibyl Vanager
□Vice Chairman	Address: 7928 East Drive	□Vice Chairman	Address: 19114 Coachmans Trace
Director	#1004	□Director	Cornelius, NC 28031
President	Miami, FL 33141	□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	■Treasurer
Other:	☐ Other:	Other:	☐ Other:
□Chairman	Name: Brooke Corry	□Chairman	Name:
□Vice Chairman	Address: 263 Village Creek Way	□Vice Chairman	Address:
□Director	Salisbury, NC 28147	□Director	7A
□President		□President	ECRETA HA
□Vice President		□Vice President	TASSE
Secretary	□Treasurer	☐Secretary	☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Other:	Other:	Other:	
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□ Director	Address.	□ Director	Addiess.
□President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	Secretary	□Treasurer
Other:	□ Other:	Other:	Other:
Nod-indexed indiv	(Signature of Chairman Vice Chairman, or any off all-Corry, Founder. Executive Director	Florida Department of 1—Cury For icer listed in number	of State Annual Report form. Junden Excentive Director 12 of the application)

To serve as a catalyst to solve and resolve the challenges that many people face and offer creative solutions to foster success in careers, business, education, and in life." Women Embracing Excellence will provide workshops, seminars, etc. to assist people in becoming self-sufficient.

FILED

SECRETARY OF STATE



Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby ertify that

WOMEN EMBRACING EXCELLENCE

is a corporation duly incorporated under the laws of the State of North Carolina, naving been incorporated on the 27th day of August, 2015, with its period of duration eing Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not uspended for failure to comply with the Revenue Act of the State of North Carolina; that he said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation

has not filed articles of dissolution as of the date of this certificate.





Scan to verify online

ertification# 104484322-1 Reference# 15207656-ACH Page: 1 of 1 erify this certificate online at http://www.sosnc.gov/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of April, 2019.

Claire I Marshall

Secretary of State