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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

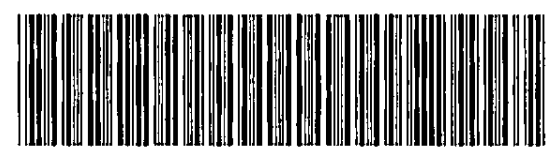
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ruffled Feathers Parrot Rescue and Sanctuary 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:

Gil Stern

Name of Person

Ruffled Feathers Parrot Rescue and Sanctuary Inc

Firm/Company

1155 Carlisle Street RM 531

Address

Hanover, PA. 17331

City/State and Zip Code

gil@ruffledfeathers.org

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

For further information concerning this matter, please call:

gil Stern

Name of Person

at ( 410 )

Area Code

292-2919

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

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**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. Ruffled Feathers Parrot Rescue and Sanctuary 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. Virginia 3. 47-5527442  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 3, 2015 5. \_\_\_\_\_  
(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. 1155 Carlisle Street Rm 531 Hanover, PA 17331  
(Principal office street address)

\_\_\_\_\_  
(Current mailing address, if different)

8. Non-Profit Rescue and Sanctuary for Parrots in need  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

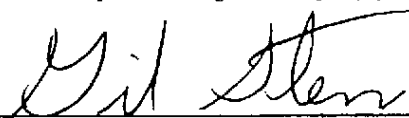
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Gil Stern

Office Address: 1162 County Rd 309  
Crescent City, Florida 32112  
(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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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: Gil Stern  
☐Vice Chairman Address: 1745 England Drive  
☒Director Hampstead, MD 21074  
☐President \_\_\_\_\_  
☐Vice President \_\_\_\_\_  
☒Secretary ☒Treasurer  
☐Other: \_\_\_\_\_ ☐Other: \_\_\_\_\_

☐Chairman Name: Yvonne England  
☐Vice Chairman Address: 1745 England Drive  
☒Director Hampstead, MD 21074  
☒President \_\_\_\_\_  
☐Vice President \_\_\_\_\_  
☐Secretary ☐Treasurer  
☐Other: \_\_\_\_\_ ☐Other: \_\_\_\_\_

☐Chairman Name: Savery M. Gradoville  
☐Vice Chairman Address: 2808 25th Street N  
☒Director Arlington, VA. 22207  
☐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. Gil Stern, Director  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Gil Stern Secretary / Treasurer  
(Typed or printed name and capacity of person signing application)

# Commonwealth of Virginia



## State Corporation Commission

### CERTIFICATE OF GOOD STANDING

*I Certify the Following from the Records of the Commission:*

That RUFFLED FEATHERS PARROT RESCUE AND SANCTUARY INC. is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is November 3, 2015;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:  
July 8, 2019*

*Joel H. Peck*  
Joel H. Peck, Clerk of the Commission