

F19000003751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

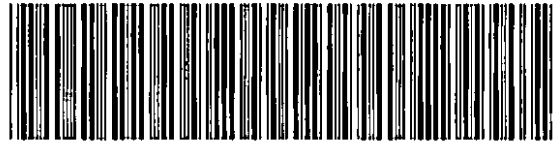
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19000064820

Office Use Only



600331384586

07/05/19--01018--007 **70.00

FILED
TALLAHASSEE, FLORIDA

2019 AUG 13 PM 3:50

Y SCOTT

AUG 14 2019

✓



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 15, 2019

TROY BLAKE
PO BOX 897
MISSION, SD 57555

SUBJECT: ROSEBUD SCHOLARSHIP FUND, INC.
Ref. Number: W19000064820

We have received your document for ROSEBUD SCHOLARSHIP FUND, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Yvette Scott
Document Specialist II

Letter Number: 319A00014332

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rosebud Scholarship Fund, 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:

Troy Blake
Name of Person

Rosebud Scholarship Fund
Firm/Company

PO Box 897
Address

Mission / SD 57555
City/State and Zip Code

troy@rosebudfund.org
E-mail address. (to be used for future annual report notification)

TALLAHASSEE, FLORIDA

2019 AUG 13 PM 3:50

FILED

For further information concerning this matter, please call:

Troy Blake at (360) 852-5564
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:

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. Resebud Scholarship Fund, Incorporated

(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. South Dakota

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

3. NA

(FEL number, if applicable)

4. 02/11/2019

(Date of Incorporation)

5. NA

(Date of duration, if other than perpetual)

6. NA

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

7. 103 W Omaha St Apt 402, Mission, SD 57555

(Principal office street address)

PO Box 897, Mission, SD 57555

(Current mailing address, if different)

8. To solicit donations to the 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: Troy Blake

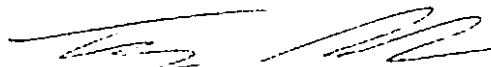
Office Address: 5690 W Atlantic Ave Apt 104

Delray Beach
(City)

Florida 33484
(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: Troy Blake
☐ Vice Chairman Address: 103 W Omaha St
☐ Director Apt 402, Mission, SD
☒ President 57555
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Mara Childs
☐ Vice Chairman Address: 1014 5th Ave N
☐ Director Apt 3, Seattle, WA
☐ President 98109
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Kevin Zhang
☐ Vice Chairman Address: 1620 21st Ave S
☐ Director Apt 230, Nashville, TN
☐ President 37212
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Strategic Advisor ☐ 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. [Signature]
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Troy Blake - President
(Typed or printed name and capacity of person signing application)

State of South Dakota

Office of the Secretary of State

Certificate of Good Standing

Domestic Nonprofit Corporation

I, **Steve Barnett**, Secretary of State of the State of South Dakota, hereby certify that

Rosebud Scholarship Fund

Business ID: NS160282

was authorized to transact business in this state on: February 11, 2019.

I, further certify that **Rosebud Scholarship Fund** has complied with the laws of this State relative to the formation of Certificate of Good Standing/Authorizations of its kind and is now regularly and properly organized and existing under the laws of this State and is in Good Standing, as shown by the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of its financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this day, July 23, 2019.

Steve Barnett

Steve Barnett
Secretary of State

07/23/2019 5:09 PM

Verification #: 011950118

FILED
2019 AUG 13 PM 3:50
TALLAHASSEE, FLORIDA