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FILED





March 9, 2020

SHERRI L. NEW 575 PHARR RD NE #52946 ATLANTA, GA 30355

SUBJECT: VETS BRIDGES TO HOPE INC

Ref. Number: W20000025257

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

PLEASE COMPLETE THE APPLICATION THAT IS ENCLOSED,

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: 720A00005102

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www.sunbiz.org

## **COVER LETTER**

10:	_	tration Se sion of C	ection orporations				
CLID	IECT.	Vets Bridg	es to Hope Inc				
SUBJ	ECT:	-	Name of Corporat	ion – must i	nclude suffix		
Dear S	Sir or M	adam:					
Affairs	s in Flo	rida", "Ce	tion by Foreign Not for Profestificate of Existence", or "Cenced not for profit corporate	Certificate of	f Status" and che	ck are submitted to	
Please	return	all corres	pondence concerning this m	atter to the f	ollowing:	2020 APR SECRETY JALLAHA	1
		Sherri L	New			<b>≀−1</b> I'ARY ASSE	
		Vets Bri	Name dges to Hope Inc	of Person		OF STATE	ED.
			Firm/0	Company		THE STATE OF THE S	
		575 Pha	л Rd Ne 52946				
		Atlanta,	Ac Ga 30355	ldress		.,	
			City/State	and Zip Cod	e	<del></del>	
		vetsbridg	ges2hope@yahoo.com				
		E-r	nail address: (to be used for	future annua	al report notificat	ion)	
For fur	ther in	formation	concerning this matter, plea	ase call:			
Sherri	L New		ati	202	445-0434		
		Name o	of Person at	Area Code	Daytime Tele	phone Number	
	Regis Divisi P.O. I	LING AD tration Se ion of Cor Box 6327 nassee, FL	ction porations		STREET/COL Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	rporations g e Center Circle	<b>}:</b>
			the following amount: e to: FLORIDA DEPARTMI	ENT OF STA	TE.		
_		ling Fee	□\$78.75 Filing Fee & Certificate of Status	□\$78.75	Filing Fee & ied Copy	\$87.50 Filing Certificate of Certified Cop	Status &

# 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:

If name unava	ilable in Florida, enter alternate	corporate name adopted for the purpo	se of transacting	ousine	ss in Florid	a)
Georgia		84-3304765 3				_
9/30/19	try under the law of which it is	5 incorporated) (FEI nu (Date of du	imber, if applicab			
(E	ate of Incorporation)	(Date of du	ration, if other the	in per	petual)	
		registration. See sections 617.1501 & 61	7 1502 FS 10 de	érmin	<u>্</u> ভক্তenalty lie	ibility.)
			AH			
J9 Amberswe	et way c/o terrance Paunii, Su	ite 280, Davenport, FL 33897  (Principal office street address)				<u> </u>
75 Pharr Rd N	le, # 52946, Atlanta, GA 30355		SSEE	_		•
. <u> </u>	(	Current mailing address, if different)	FLOR		ت پ	:
וופמגדו אחועמי			y comiscinie, wo			•
urpose(s) of o	orporation authorized in home	oard to homeless US veterans, including state or country to be carried out in the red agent: (P.O. Box NOT acceptate	state of Florida)			
urpose(s) of c	orporation authorized in home	state or country to be carried out in the	state of Florida)		<u> </u>	
urpose(s) of o ame and stro Name:	orporation authorized in home et address of Florida registe	state or country to be carried out in the red agent: (P.O. Box NOT acceptal	state of Florida)			
urpose(s) of o ame and stro Name:	orporation authorized in home et address of Florida registe Terrance Paulin	state or country to be carried out in the red agent: (P.O. Box NOT acceptated)	state of Florida)			
urpose(s) of c	orporation authorized in home et address of Florida registe Terrance Paulin 109 Ambersweet Way, suite 28	state or country to be carried out in the red agent: (P.O. Box NOT acceptates)  80  Florida	state of Florida)			

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 oustody 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 Terrance Paulin TTEE □Chairman Name: \_\_ □Chairman 575 Pharr Rd Ne Address: \_\_\_\_\_\_ □Vice Chairman □Vice Chairman Address: 52946 □Director □Director Atlanta, GA 30355 □President □President □Vice President □Vice President □Treasurer □Secretary □Treasurer □ Secretary CEO Other:\_\_\_\_ ☐ Other:\_\_\_\_\_ 📕Other: 🔃 Malik Marin TTEE □Chairman Name: Name: □Chairman 575 Pharr Rd Ne □Vice Chairman Address: \_\_ □Vice Chairman Address: \_\_\_\_ 52946 □Director □Director Atlanta GA 30355 □President □President □Vice President □Vice President □Treasurer □Secretary □Treasurer **■**Secretary ☐ Other:\_\_\_\_\_ ☐ Other: □Other: \_\_\_\_\_ ☐ Other:\_\_\_\_\_ Sherri L New TTEE Name: \_\_\_\_\_ □Chairman □Chairman 575 Pharr Rd Ne Address: \_\_\_\_\_\_\_ □Vice Chairman Address: □Vice Chairman 52946 □Director □Director Atlanta GA 30355 □President □President □Vice President □Vice President □Treasurer □Secretary □Treasurer □Secretary Other: ☐ Other:\_\_\_\_\_ ☐ 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.

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Sherri L New TTEE CFO (Typed or printed name and capacity of person signing application)

Control Number: 19131430

## STATE OF GEORGIA

## Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I. Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Vets Bridges to Hope Inc a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business. In Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 18673875 Date Inc/Auth/Filed : 09/30/2019 Jurisdiction : Georgia Print Date : 02/27/2020

Form Number : 211



Brad Raffensperger