

F20000002724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

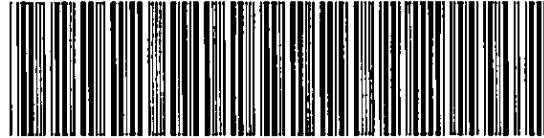
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20 JUN 17 PM 6:01
U.S. DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Partnership for Gulf Coast Land Conservation 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:

Becky Prado

Name of Person

Partnership for Gulf Coast Land Conservation

Firm/Company

PO Box 13121

Address

Tallahassee, FL 32317

City/State and Zip Code

becky.prado@gulfpартnership.org

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

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For further information concerning this matter, please call:

Becky Prado

at (850) 443-3132

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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. Partnership for Gulf Coast Land Conservation 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. Mississippi 3. 84-4616018
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/06/2020 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. April 27, 2020
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 3712 Longfellow Rd, Tallahassee, FL 32311
(Principal office street address)

PO Box 13121, Tallahassee, FL, 32317
(Current mailing address, if different)

8. The Partnership for Gulf Coast Land Conservation's mission is to increase the pace, quality and permanence of
(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: Becky Prado

Office Address: 3712 Longfellow Rd
Tallahassee, Florida 32311
(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: Christine P. Johnson
☐ Vice Chairman Address: _____
☐ Director Conservation Foundation Of The Gulf C
☐ President Post Office Box 902
☐ Vice President Osprey, FL 34229-0902
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Tom Kay
☐ Vice Chairman Address: Alachua Conservation Trust
☐ Director 7204 SE County Road 234
☐ President Gainesville, FL 32641
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Meg Goecker
☒ Vice Chairman Address: Alabama Coastal Heritage Tru
☐ Director 1911 Government Street
☐ President Mobile, AL 36606-1625
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Becky Prado
☐ Vice Chairman Address: Partnership for Gulf Coast Lan
☒ Director PO Box 13121
☐ President Tallahassee, FL 32314-52317
☐ 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. Becky Prado
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Becky Prado
(Typed or printed name and capacity of person signing application)



Michael Watson
SECRETARY OF STATE

I, MICHAEL WATSON, Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on the 6th day of February, 2020, the State of Mississippi issued a Charter/Certificate of Authority to:

PARTNERSHIP FOR GULF COAST LAND CONSERVATION, INC.

That the state of incorporation is Mississippi.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

That insofar as the records of this office are concerned, the said Partnership for Gulf Coast Land Conservation, Inc. is in good standing at this time.

Given under my hand and seal of office
the 10th day of June, 2020

Michael Watson