

F20000002972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

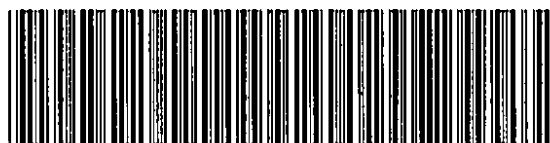
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W200000055842

Office Use Only



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05/25/20--01018--005 \*\*70.00

FILED  
2020 JUL -1 PM 3:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

US  
7/2/20 ✓



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 5, 2020

LOREN MCCUTCHEON  
13050 SE 120TH STREET  
DUNNELLON, FL 34431

SUBJECT: NOAH'S ARK EDUCATIONAL ZOO  
Ref. Number: W20000055842

*Sorry about  
that. I know  
I have it all set  
& filled out  
this  
TH*

We have received your document for NOAH'S ARK EDUCATIONAL ZOO and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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: 120A00011140

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JUL 01 2020

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Noah's Ark Educational Zoo  
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:

Loren McCutcheon  
Name of Person  
Noah's Ark Educational Zoo  
Firm/Company  
13050 SE 120<sup>th</sup> Street  
Address  
Dunnellon Florida 34431  
City State and Zip Code  
LORIMCCR@gmail.com  
E-mail address: (to be used for future annual report notification)

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DIVISION OF STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

2020 JUL -1 PM 3:01

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For further information concerning this matter, please call:

LORI McCutcheon at ( 267 ) 718-2405  
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. Noah's Ark Educational Zoo 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. Pennsylvania

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

3. 83-1713505

(FEI number, if applicable)

4. 8/30/18

(Date of Incorporation)

5. \_\_\_\_\_

(Date of duration, if other than perpetual)

6. Just started May 19, 2020

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

7. 13050 SE 120<sup>th</sup> Street Dunnellon, Fla 34431

(Principal office street address)

(Current mailing address, if different)

8. Animal Rescue + Rehab with Education about the animals

(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: Loren McClutcheon

Office Address: 13050 SE 120<sup>th</sup> street

Dunnellon

(City)

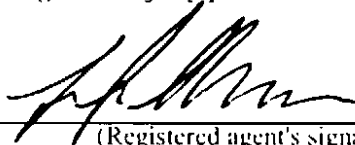
, Florida

34431

(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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TALLAHASSEE, FLORIDA

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: Loren McCutcheon

☐ Vice Chairman Address: 13050 SE 120<sup>th</sup> St.

☐ Director Dunnellon Fla

☒ President 34431

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Devon Benetz

☐ Vice Chairman Address: 117 Lyons Rd

☒ Director Mertztown PA

☐ President 19539

☐ Vice President \_\_\_\_\_

☐ Secretary ☒ Treasurer

☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Taylor Benetz

☐ Vice Chairman Address: 1043 Birchwood Ln

☐ Director Jacksonville NC

☐ President 28540

☒ 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. [Signature]  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Loren J. McCutcheon President Chairman  
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

05/24/2020

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

NOAH'S ARK EDUCATIONAL ZOO

is duly registered as a Pennsylvania Non-Profit (Non Stock) under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

*Kathleen Bookman*

Secretary of the Commonwealth

Certification Number: TSC200524110331-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>

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2020 JUL -1 PM 3:11  
DEPARTMENT OF STATE  
HALL OF MONROE, PHILADELPHIA