

(Requestor's Name)					
(Address)					
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(Business Entity Name)					
(Document Number)					
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Zion Nation Non Profit Organization

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:

	Chelah R	yan					
	<u> </u>	Name	of Person				
	Zion Nat	ion Non Profit Organization					
		Firm	/Company				
	4896 Soi	th Dudley Street					
	Unit 9-12	2					
		A	ddress		1.4	1 2	
	Littleton		80123	5	244 1 4 4 1 4 4 4 4	JUL (-1
		City/State	and Zip Coo	le	57 1 7	· N	- <u></u>
	info@wo	hac.org			: ۲		Ē
	E-n	ail address: (to be used fo	r future annu	ial report notific	cation)	MN 4: 00	
For further inf	ormation	concerning this matter, ple	ease call:			00	
Chelah Ryan		a	970	422-6022			
	Name o	f Person	Area Code	Daytime To	elephone Nur	nber	
Regis	<u>g Address</u> tration Se ion of Co	-	Regi	t Address: stration Section sion of Corpor			
	Box 6327			Centre of Talla			
Tallar	iassee, F	L 32314		N. Monroe St hassee, FL 32		10	
		the following amount:					
Please make che		e to: FLORIDA DEPARTN \$78.75 Filing Fee & Certificate of Status	□\$78.75	ATE Filing Fee & ified Copy		-	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:

	son Profit Corporation					
(Name of corpo import in langua in the name at p	ration: must include the word age as will clearly indicate tha resent. "Company" or "Co." i	"INCORPORATEI at it is a corporation may not be used as a	D" or "CORPORATIC instead of a natural po corporate suffix by a	N" or words or a rson or partnersl nonprofit corpor	abbreviatio hip if not sc ration.)	ns of like contained
World Organiz	ation of Health and Culture (V	VOHAC)				
(If name unava	ailable in Florida, enter altern	ate corporate name a	dopted for the purpos	c of transacting	business in	Florida)
2. Minnesota		3				
	ntry under the law of which it		(FEI nu	mber, if applicab	ole)	
4, 11/03/2008		5.				
([Date of Incorporation)		(Date of du	ation, if other the	an perpetua	l)
	ucted affairs in Florida if prior					
(Date first cond	ucted affairs in Florida if prior	to registration. See se	ctions 617.1501 & 61	7.1502, F.S. to de	termine per	alty liability.)
7 1880 Grand A	ve. Saint Paul, MN 55105					
		(Principal office	street address)			
4896 South Du	dley Street Unit 9-12, Littleto	n CO 80123				
		(Current mailing ac	dress. if different)			
		-				
8 Provide afford	able alternative healing resou	rces and services to	qualified disadvantag	ed persons at an :	affordabl e t	rate.
(Purpose(s) of	able alternative healing resou corporation authorized in hon	e state or country to	be carried out in the	state of Florida)	<u></u>	
0 NI 1 .						••
9. Name and str	eet address of Florida regis	tered agent: (P.O.	Box <u>NOT</u> acceptab	le)		
	Cauth Pallar					
Name:	Scott Keller					
Office Address:	1881 NE 26th St. Suite 236					
	Fort Lauderdale		, Florida <u>33305</u>			•
	(City)		(Zip Čode)		

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	Chelah Ryan Name:	□Chairman	Name:
□Vice Chairman	4896 South Dudley Street	□Vice Chairman	Address:
Director	Unit 9-12	Director	·
President	Littleton, CO	□President	
Vice President	80123	□Vice President	
Secretary	Treasurer	Secretary	Treasurer
□Other:	Other:	DOther:	Other:
□Chairman	Scott Keller Name:	Chairman	. Name:
□Vice Chairman	Address:	Vice Chairman	Address:
Director	Unit 1405		
President	Pampano Beach, Fl.	□President	
□Vice President	33062	□Vice President	
Secretary	Treasurer	Secretary	⊡Treasuccit
□Other:	Other:	Other:	
□ Chairman	Darius Collins Name:	□Chairman	Name:
□Vice Chairman	Address:	🗇 Vice Chairman	Address:
Director	Saint Paul, MN	Director	
□President	55105	President	
Vice President		□Vice President	
Secretary	Treasurer	Secretary	Treasurer
[] Other:	[] Other:	□Other:	Other:

NOTE: <u>Important Notice:</u> 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 glaphic symbols filling to reflacible Tage contractific are Anarchi Tager letter.

13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14.	(Typed or printed name and capacity of person signing application)

Office of the Minnesota Secretary of State **Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Zion Nation Non-Profit Organization
11/03/2008
3071152-2
31 7 A
Minnesota

This certificate has been issued on:

12 - 1 - 1 - 2 S

06/14/2020



Steve Primm

Steve Simon Secretary of State State of Minnesota