

F20000003712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

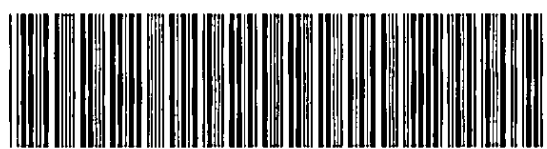
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Certified Copies _____ Certificates of Status _____

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FILED
2020 AUG 25 PM 3:00
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 10, 2020

RHONDA MITCHELL SAMUEL
13311 PURPLE FINCH CIR.
LAKEWOOD RANCH, FL 34202

SUBJECT: SEEDS 4 HARVEST, INC.
Ref. Number: W20000087616

We have received your document for SEEDS 4 HARVEST, 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):

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.

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: 020A00015051

COVER LETTER

TO: Registration Section
Division of Corporations
Seeds 4 Harvest, Inc

SUBJECT: _____
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:

Rhonda Mitchell Samuel

Name of Person

Seeds 4 Harvest, Inc

Firm/Company

13311 Purple Finch Cir

Address

Lakewood Ranch, Florida 34202

City/State and Zip Code

rhondasamuel3994@bellsouth.net

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

For further information concerning this matter, please call:

Rhonda Mitchell Samuel

678

5207195

Name of Person

at (_____) _____
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

FILED
2022 AUG 25 PM 3:00
TALLAHASSEE, FLORIDA

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. Seeds 4 Harvest, 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. Alabama 3. 26-4508521
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/13/2009 5. _____
 (Date of Incorporation) (Date of duration, if other than perpetual)

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

7. 13311 Purple Finch Cir
 (Principal office street address)

13311 Purple Finch Cir, Lakewood Ranch, FL 34202
 (Current mailing address, if different)

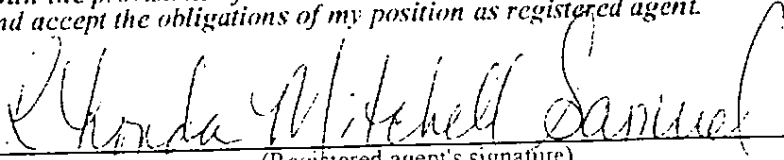
FILED
 AUG 25 PM 3:00
 TALLAHASSEE, FLORIDA

8. Mentorship
 (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: Rhonda Mitchell Samuel
 Office Address: 13311 Purple Finch Cir
Lakewood Ranch, Florida 34202
 (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 state of _____ which is to be inserted here.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Rhonda Mitchell Samuel

- Chairman Name: _____
13311 Purple Finch Cir
- Vice Chairman Address: _____
Lakewood Ranch, FL 34202
- Director _____
- President _____
- Vice President _____
- Secretary Treasurer
- Other: _____ Other: _____

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

Michael Samuel

- Chairman Name: _____
13311 Purple Finch Cir
- Vice Chairman Address: _____
Lakewood Ranch, FL 34202
- Director _____
- President _____
- Vice President _____
- Secretary Treasurer
- Other: _____ Other: _____

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

2023 AUG 25 AM 3:00
 STATE OF FLORIDA
 DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

Carla Hicks

- Chairman Name: _____
4215 St Bernard Ave
- Vice Chairman Address: _____
New Orleans, La 70122
- 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. Some two-step filing systems may require the inclusion of filing your Florida Department of State Annual Report form.

13. Rhonda Mitchell Samuel
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Rhonda Mitchell Samuel
(Typed or printed name and capacity of person signing application)

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Seeds 4 Harvest Inc. was formed in Baldwin County, Alabama on March 13, 2009. The Alabama Entity Identification number for this entity is 569-431. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

2020 AUG 25 PM 3:00
STATE OF ALABAMA
SECRETARY OF STATE

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.



08/25/2020

Date

Secretary of State

20200825030003379