

721000000299

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

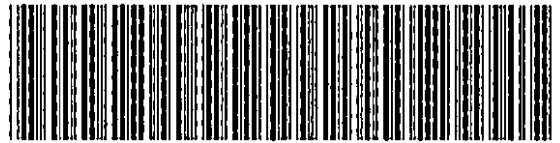
(Business Entity Name)

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01/12/21--01012--017 \*\*70.00

01/12/21 10:10:00

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ISAIAH 117 HOUSE 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:

WHITNEY DILLARD

Name of Person

ISAIAH 117 HOUSE

Firm/Company

PO BOX 842

Address

ELIZABETHTON, TN 37644

City/State and Zip Code

info@isaiah117house.com

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

For further information concerning this matter, please call:

WHITNEY DILLARD

Name of Person

at ( 423 ) 518-3763

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. ISAIAH 117 HOUSE 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. TENNESSEE 3. 82-0631497  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06/07/2017 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

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

7. 1705 STATE LINE RD, ELIZABETHTON, TN 37643  
(Principal office street address)

PO BOX 842, ELIZABETHTON, TN 37644  
(Current mailing address, if different)


8. Provide physical and emotional support in a safe and loving home for children awaiting foster care placement.  
(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: NORTHWEST REGISTERED AGENT LLC  
Office Address: 7901 4TH ST N, STE 300  
ST. PETERSBURG, Florida 33702  
(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.

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: SARAH PRESNELL  
☐ Vice Chairman Address: 1705 STATE LINE RD  
☐ Director ELIZABETHTON, TN 37644  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: ERIK ZETTERBERG  
☐ Vice Chairman Address: 1705 STATE LINE RD  
☒ Director ELIZABETHTON, TN 37643  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: SIENA RAMBO  
☐ Vice Chairman Address: 1705 STATE LINE RD  
☐ Director ELIZABETHTON, TN 37643  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: ANDREW MCKEEHAN  
☐ Vice Chairman Address: 1705 STATE LINE RD  
☒ Director ELIZABETHTON, TN 37643  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: HEATHER HOPLAND  
☐ Vice Chairman Address: 1705 STATE LINE RD  
☐ Director ELIZABETHTON, TN 37643  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: PAM HARR  
☐ Vice Chairman Address: 1705 STATE LINE RD  
☒ Director ELIZABETHTON, TN 37643  
☐ 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. Sarah Presnell  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. SARAH PRESNELL - PRESIDENT  
(Typed or printed name and capacity of person signing application)

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION  
TO CONDUCT ITS AFFAIRS IN FLORIDA**

**ISAIAH 117 HOUSE INC**

**12.A. DIRECTORS CONTINUED:**

Board of Directors		
Name	Title	Address
Aaron Jensen	Director	1705 State Line Rd, Elizabethton, TN 37643
Chris Carder	Director	1705 State Line Rd, Elizabethton, TN 37643
Lee Acres	Director	1705 State Line Rd, Elizabethton, TN 37643
Lee Harrison	Director	1705 State Line Rd, Elizabethton, TN 37643
Lynn Richardson	Director	1705 State Line Rd, Elizabethton, TN 37643

2016.01.01



**Tre Hargett**  
Secretary of State

**Division of Business Services**

**Department of State**

State of Tennessee

312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

WHITNEY DILLARD  
PO BOX 842  
ELIZABETHTON, TN 37644

January 4, 2021

Request Type: Certificate of Existence/Authorization  
Request #: 0396453

Issuance Date: 01/04/2021  
Copies Requested: 1

**Document Receipt**

Receipt #: 005957516

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3795955691

\$20.00

Regarding: Isaiah 117 House

Filing Type: Nonprofit Corporation - Domestic

Formation/Qualification Date: 06/07/2017

Status: Active

Duration Term: Perpetual

Business County: CARTER COUNTY

Control #: 907498

Date Formed: 06/07/2017

Formation Locale: TENNESSEE

Inactive Date:

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Isaiah 117 House

\* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;

\* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

\* has filed the most recent annual report required with this office;

\* has appointed a registered agent and registered office in this State;

\* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett  
Secretary of State

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