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COVER LETTER

TO:	Registration Section Division of Corporations
CHDI	ECT: MARD Philanthropy Services Limited Corporation
SUBJ	Name of Corporation – must include suffix
Dear S	Sir or Madam:
Affair	nclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its s in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to the above referenced not for profit corporation to conduct its affairs in Florida.
Please	return all correspondence concerning this matter to the following:
	Cynthia Mercado
	Name of Person
	Caritas Law Group
	Firm/Company
	2307 S Rural Road
	Address
	Tempe, Arizona 85282
	City/State and Zip Code
	cynthia@caritaslawgroup.com
	E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
Cyntl	at () 480 428-3392
-	Name of Person Area Code Daytime Telephone Number
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303
Please	sed is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE 0.00 Filing Fee

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:

ı - MARD Philai	nthropy Services Limited Corporation					
(Name of corpoint in languing the name at p	oration; must include the word "INCORPORA age as will clearly indicate that it is a corpora present, "Company" or "Co." may not be used	ATED" or "CO ation instead of d as a corporate	RPORATION" or words or a a natural person or partnersh suffix by a nonprofit corpor	ibbreviati ip if not ation.)	ons of so cont	like ained
(If name unav	ailable in Florida, enter alternate corporate na	ame adopted fo	r the purpose of transacting b	ousiness i	n Flori	da)
2. Delaware		3. 83-4534455				
(State or cou	ntry under the law of which it is incorporated	d) -	(FEI number, if applicab	le)		
4. <u>4/22/2019</u>		5. perpetual				
(I	Date of Incorporation)		Date of duration, if other that	in perpeti	ual)	
5. <u>n/a</u>						
(Date first conc	ducted affairs in Florida if prior to registration.	See sections 617	.1501 & 617.1502, F.S. to de.	termine p	enalty l	iability.)
7 18262 Daybre	ak Drive, Boca Raton, Florida 33496					
/·		office street ad	dress)			
.	(Current mail	ing address. if d	lillerent)			
Provide servic	es and grants to charitable organizations sole corporation authorized in home state or coun	ely for charitabl	e purposes.		2022	
(Purpose(s) of	corporation authorized in home state or coun	try to be carrie	d out in the state of Florida)		====	
9. Name and <u>str</u>	reet address of Florida registered agent: (P.O. Box <u>NO</u>	$\underline{\mathbf{T}}$ acceptable)	경기 건설 건설	: 27	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Name:	C T Corporation System			—M.00 100 00 100 00	AH 7: 2!	
Office Address	1200 South Pine Island Road			ニゴ	7: 2	
	Plantation	Florida	33324	- m	ည်	
	(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.

David Westcott Assistant Secretary (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. DIRECTOR			A L. MCH.
□Chairman	Name: Name:	□Chairman	Name:
□ Vice Chairman	Address:	□Vice Chairman	Address:
■Director	18262 Daybreak Drive	■Director	18262 Daybreak Drive
President	Boca Raton, FL 33496	□President	Boca Raton, FL 33496
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
Other:	Other:	□Other:	□Other:
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	Treasurer
□Other:	Other:	□Other:	Other:
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
□Other:	☐ Other:	Other:	Other:
NOTE: Importan Non-indexed indiv 13. Nicole Carol	(Signature of Chairman, vice Chairman, or any orn	Florida Department of the control of	of State Annual Report form. 12 of the application)
	(13 pea of printed name and capacity of per	son soming apprican	····/

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MARD PHILANTHROPY SERVICES LIMITED" IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF MAY, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

Authentication: 203462567

Date: 05-18-22