

F22000004439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

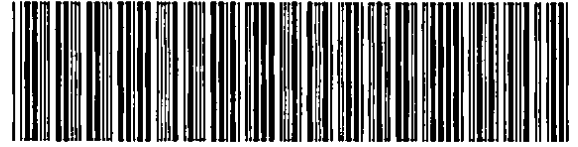
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2022 JUN 30 AM 7:10

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06/30/22--01019--023 **87.50

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Purple Jewel Corporation

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:

Kathleen Reynolds

Name of Person

Purple Jewel Corporation

Firm/Company

160 Coventry Pl SW

Address

Marietta, GA 30064

City/State and Zip Code

info@purplejewel.org

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

For further information concerning this matter, please call:

Kathleen Reynolds

323

244-6444

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

**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. Purple Jewel Corporation

(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. Georgia

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

3. 46-3307984

(FEI number, if applicable)

4. July 8, 2013

(Date of Incorporation)

5. _____

(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. 160 Coventry Pl SW, Marietta, GA 30064

(Principal office street address)

(Current mailing address, if different)

8. Charitable Organization engaged in social welfare activities for the homeless and those victimized by domestic violence.

(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: Elizabeth Perkins

Office Address: 5440 Roanoke Blvd.

Jacksonville

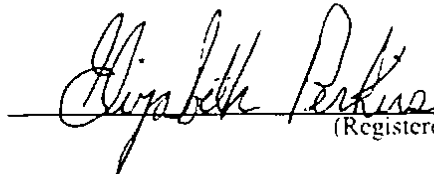
(City)

Florida 32208

(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.

2022 JUN 30 AM 7:10
STATE OF FLORIDA
DEPARTMENT OF STATE

FILED

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: Kathleen Reynolds
☐ Vice Chairman Address: 160 Coventry Pl SW
☐ Director Marietta, GA 30064
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other: ☐ Other:

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other: ☐ Other:

☐ Chairman Name: Quiana Jones
☐ Vice Chairman Address: 160 Coventry Pl SW
☐ Director Marietta, GA 30064
☐ President
☐ Vice President
☒ Secretary ☐ Treasurer
☐ Other: ☐ Other:

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other: ☐ Other:

☐ Chairman Name: Bruce Mosley
☐ Vice Chairman Address: 160 Coventry Pl SW
☐ Director Marietta, GA 30064
☐ 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 of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Kathleen Reynolds
(Typed or printed name and capacity of person signing application)

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

PURPLE JEWEL CORPORATION

a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 23261330
Date Inc/Auth/Filed: 06/07/2013
Jurisdiction : Georgia
Print Date : 06/21/2022
Form Number : 211



Brad Raffensperger

Brad Raffensperger
Secretary of State