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S. FRANKLIN AUG 2 6 2022

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	ECT: Adoption-Share, Inc.				
	Name of Corporation – must include suffix				
Dear S	ir or Madam:				
Affair	relosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to r the above referenced not for profit corporation to conduct its affairs in Florida.				
Please	return all correspondence concerning this matter to the following:				
	Thea Ramirez				
	Name of Person				
	Adoption-Share, Inc.				
	Adoption-Share, Inc. Firm/Company				
	P.O. Box 1532				
	Address				
	Brunswick, GA 31521				
	City/State and Zip Code				
	thea@adoption-share.com				
	E-mail address: (to be used for future annual report notification)				
For fu	rther information concerning this matter, please call:				
Thea	Ramirez. 912 222-8819 at ()				
	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:

		lorida			
Georgia	_{3.46-4041847}				
(State or cou	ntry under the law of which it is incorporated) 3. 46-4041847 (FEI number, if applicable)				
August 27, 20	5.				
(1	Date of Incorporation) 5. (Date of duration, if other than perpetual)			
(Date first conc	lucted affairs in Florida if prior to registration. See sections 617 1501 & 617.1502. F.S. to determine penal	(ए द्रीक इंड			
1027 Egmont	Street, Brunswick, GA 31520	,—; ;			
	(Principal office street address)	: 2			
PO 1532 Rm	mercials GA 31521	Š			
P.O. 1532, Brunswick, GA 31521 (Current mailing address, if different)					
	mission of leveraging technology to bring reform, efficiency, and innovation to domestic adoption.	- - - -			
Carry out our	titioning of revenience sectioning to pittle terraini enterene it me into any at a comment and any				
(Purpose(s) of	corporation authorized in home state or country to be carried out in the state of Florida)				
(Purpose(s) of	corporation authorized in home state or country to be carried out in the state of Florida)				
(Purpose(s) of	corporation authorized in home state or country to be carried out in the state of Florida) rect address of Florida registered agent: (P.O. Box NOT acceptable)				
(Purpose(s) of Name and str	corporation authorized in home state or country to be carried out in the state of Florida) reet address of Florida registered agent: (P.O. Box NOT acceptable)				
(Purpose(s) of Name and str Name:	corporation authorized in home state or country to be carried out in the state of Florida) reet address of Florida registered agent: (P.O. Box NOT acceptable) Amy Simpson				
(Purpose(s) of Name and str Name:	corporation authorized in home state or country to be carried out in the state of Florida) reet address of Florida registered agent: (P.O. Box NOT acceptable)				

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.

Amy Simpson

Digitally signed by Amy Simpson Date: 2022.08.16 21:53:31 -04'00'

(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	Thea Ramirez Name:	□Chairman	Name: Carlos Garcia
□Vice Chairman	Address:	□Vice Chairman	Address:
□ Director	Brunswick, GA 31520	□Director	West Chicago, IL 60185
□ President		□President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	☐ Secretary	■ Treasurer
Other:	Other:	□Other:	
⊒Chairmæn	Thea Ramirez	□Chairman	Name:
∃Vice Chairman	Address:	□Vice Chairman	Address.
☐ Director	Brunswick, GA 31520	Director	Address.
□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
Non-indexed ind	nt Notice: Use an attachment to report more the ividuals may be added to the index when filing	g your Florida Department	of State Annual Report form.
13	(Signature of Chairman, Vice Chairman, or Anthea "Mea"	.n ·	
[4 	(Typed or printed name and capacit	y of person signing applica	ation)

Control Number: 13451509

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

Adoption-Share, Inc. a Domestic Nonprofit Corporation

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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 : 23617505 Date Inc/Auth/Filed: 08/27/2013 Jurisdiction : Georgia Print Date : 08/15/2022

Form Number 211



Brad Rafforsperger