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COVER LETTER

TO: Registration Section Division of Corporations

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SUBJECT:_One World Children's Fund

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:

Tim	O'Connor			
	Name	of Person		
NPS	S Corporation			
	Firm/Company			
999 (Corporate Drive, Suite 100			
	A	ldress		
Lade	ra Ranch, CA 92694			
	City/State and Zip Code			
tocon	nor@npsscorp.com			
	E-mail address: (to be used for	future annual r	eport notific	ration)
For further informati	ion concerning this matter, plea	ase call:		
Tim O'Connor	at	888 S.	35-0877	
Nan	ne of Person	Area Code'	Daytime Te	lephone Number
<u>Mailing Addi</u> Registratior	Section	-	tion Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	for the following amount:			
	able to: FLORIDA DEPARTM ■S78.75 Filing Fee & Certificate of Status	ENT OF STATI □\$78.75 Fili Certified	ing Fee &	□\$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:

	Children's Fund Incorporate					
(Name of corr import in lang in the name at	oration: must include the w uage as will clearly indicate present. "Company" or "Co	ord "INCORPORAT: that it is a corporatio " may not be used as	ED" or "CORPORATION" n instead of a natural person a corporate suffix by a non	or words or abbrevia n or partnership if no profit corporation.)	tions of it so con	like tained
(If name una	vailable in Florida, enter alte	emate corporate name	adopted for the purpose of	transacting business	in Flori	ida)
2. California		3	77-0479205			
(State or co	untry under the law of which	h it is incorporated)	(FEI numbe	r, if applicable)		
4 March 10, 19	98	F				
(Date of Incorporation)		(Date of duration	n, if other than perpe	tual)	
6.						
(Date first con	ducted affairs in Florida if pri	or to registration. See	sections 617.1501 & 617.15	02. F.S. to determine	penalty i	iability.)
	e Boulevard, #506, Los Ang					
		(Principal offic	æ <u>street</u> address)			
P.O. Box 849	129, Los Angeles, CA. 9008	14-9129				
		(Current mailing:	address, if different)	· · · · · · · · · · · · · · · · · · ·		
8. Provide finan	cial and other support to gra	ssroots or community	/-based organizations assist	ing the underserved	mégeo	ty.
(rutpose(s) of	corporation authorized in h	ome state or country	to be carried out in the state	of Florida) 🦷 🥻	325	
9. Name and <u>st</u>	reet address of Florida reg	gistered agent: (P.O	. Box <u>NOT</u> acceptable)		AUG 30	
Name:	Tara Barrett			بز ب	Чd	0
Office Address:	25806 Cockleshell Drive	(-a17			H 12:	
	Bonita Springs		_, Florida		ယ	
	(City)		(Zip (Code)		

10. Registered agent's acceptance:

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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.



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.

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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	Lauren Coberly Name:	□Chairman	Sonny Grewal Name:
□Vice Chairman	Address:	⊡Vice Chairman	451 Haight Avenue
Director	Sausalito, CA, 94965	Director	Alameda, CA. 94501
□President		□President	
□Vice President		□Vice President	
□Secretary	□ Treasurer	Secretary	Treasurer
Other:	Other:	□Other:	Other:
□ Chairman	Nirav Patel	□Chairman	August Pabst
□Vice Chairman	Address:		3108 Glendale BL #506
Director	Redwood City, CA. 94061		Address: Los Angeles, CA, 90039
President		President	
□Vice President		□Vice President	
Secretary	□Treasurer	□Secretary	Treasurer
DOther:	Other:	CEO Other:	Other:
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	⊡Vice Chairman	Address:
Director		Director	
⊡President		DPresident	
□Vice President		DVice President	
Secretary	□Treasurer	□Secretary	□Treasurer
🗆 Other:	Other:	□Other:	Other:

NOTE: <u>Important Notice:</u> 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	8.23.22
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14.	August Pabst, CEO
	(Typed or printed name and capacity of person signing configuration)

(Typed or printed name and capacity of person signing application)



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name:	ONE WORLD CHILDREN'S FUND
Entity No.:	2082042
Registration Date:	03/10/1998
Entity Type:	Nonprofit Corporation - CA - Public Benefit
Formed In:	CALIFORNIA
Status:	Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 18, 2022.

SHIRLEY N. WEBER, PH.D. Secretary of State

Certificate No.: 022958027

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