F22000007133

(Re	questor's Name))
(Ad	dress)	
(Ade	dress)	
(Cit	y/State/Zip/Phor	ne #1
	Joure Physics	
		MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	Certificate	es of Status
•	-	
·		
Special Instructions to I	Filing Officer:	.6
		a
		A A A
	ار	(m)
	Ň	S/ AN
	. 10	N' L'Y U
	N.	0,0,07
	· · · ·	-010

Office Use Only



11-022--0110--024 **70.00

51 : 51 L C: 13

S. FRANKLIN NOV 2 1 2022

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Hello Seven Foundation 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:

Name of Person	
Hull & Chandler	
Firm/Company	
1001 Morehead Square Drive, Suite 450	
Address	
Charlotte, NC 28203	
City/State and Zip Code	<u> </u>

•

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

For further information concerning this matter, please call:

Liz Vennum	704 375-8488 at ()
Name of Person	Area Code Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	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 & □\$78.75 Filing Fee & □\$87.50 Certificate of Status Certified Copy Certifi

□\$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:

Hello Seven Foundation 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.)

North Carolin	a	87-3248558	
(State or cour	a ntry under the law of which it is incorporated)	(FEI number, if applicable)	
October 21, 20	121 5	(Date of duration, if other than perpetua	
(1	Date of Incorporation)	(Date of duration, if other than perpetua	1)
		e sections 617.1501 & 617.1502, F.S. to determine pen	
			alty lie
1001 Morehea	d Square Drive. Suite 450 Charlo (Principal off	He, NC 28203	
	(Principal of	ice streef address)	
			2
	(Current mailing	g address, if different)	227
pregnani/postpar	ndation is a charitable non-profit whose mission is to it tum mothers so they can hire professional prenatal and	mprove the lives of Black women by providing funds to Black postpartum support namely doulas, night nurses, and childe:	
pregnani/postpar	ndation is a charitable non-profit whose mission is to it tum mothers so they can hire professional prenatal and	mprove the lives of Black women by providing funds to Black postpartum support namely doulas, night nurses, and childe:	2277 22
pregnani/postpar allowing them to (Purpose(s) of o	ndation is a charitable non-profit whose mission is to tum mothers so they can hire professional prenatal and invest time and energy into their careers and business corporation authorized in home state or country	mprove the lives of Black women by providing funds to Black postpartum support namely doutas, night nurses, and childe es without their families suffering. y to be carried out in the state of Florida)	
pregnani/postpar allowing them to (Purpose(s) of o	ndation is a charitable non-profit whose mission is to it tum mothers so they can hire professional prenatal and	mprove the lives of Black women by providing funds to Black postpartum support namely doutas, night nurses, and childe es without their families suffering. y to be carried out in the state of Florida)	2 Pi
pregnant/postpar allowing them to (Purpose(s) of o Name and <u>stra</u>	ndation is a charitable non-profit whose mission is to it tum mothers so they can hire professional prenatal and invest time and energy into their careers and business corporation authorized in home state or country eet address of Florida registered agent: (P.	mprove the lives of Black women by providing funds to Black postpartum support namely doutas, night nurses, and childe es without their families suffering. y to be carried out in the state of Florida)	5 bi. e. i
pregnant/postpar allowing them to (Purpose(s) of o Name and <u>str</u> Name:	ndation is a charitable non-profit whose mission is to i tum mothers so they can hire professional prenatal and invest time and energy into their careers and businessi corporation authorized in home state or country eet address of Florida registered agent: (P. Registered Agents Inc.	mprove the lives of Black women by providing funds to Black postpartum support namely doutas, night nurses, and childe es without their families suffering. y to be carried out in the state of Florida)	2 Pi
pregnani/postpar allowing them to (Purpose(s) of o Name and <u>str</u> Name:	ndation is a charitable non-profit whose mission is to it tum mothers so they can hire professional prenatal and invest time and energy into their careers and business corporation authorized in home state or country eet address of Florida registered agent: (P.	mprove the lives of Black women by providing funds to Black postpartum support namely doutas, night nurses, and childe es without their families suffering. y to be carried out in the state of Florida)	5 bi. e. i

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. DIRECTOR			
Chairperson	Rachel Rodgers	DChairman	Brittany Martin Name:
□Vice Chairman	c/o Hull & Chandler Address:	□Vice Chairman	c/o Hull & Chandler Address:
Director	1001 Morehead Square Drive Suite 450	Director	1001 Morehead Square Drive Suite 450
President	Charlotte, NC 28203	□President	Charlotte, NC 28203
Uvice President		□Vice President	
	Treasurer	Secretary	Treasurer
□Other:	Other:	Other:	[]Other:
	Name: C/o Hull & Chandler		Name: Shaelina Holmes
□Vice Chairman	Address:	□Vice Chairman	Address:
■Dir c ctor		Director	
□President	Charlotte, NC 28203	President	Charlotte, NC 28203
□Vice President		□Vice President	د.
Secretary	Treasurer	Secretary	Treasurer
□Other:	Other:	Executive	Director
			Ü
□Chaiπnan	Name:	DChairman	Name:
□Vice Chairman	Address:	DVice Chairman	Address:
Director	<u></u>	Director	<u></u>
□President		President	
□Vice President		□Vice President	<u></u>
Secretary	□Treasurer	Secretary	Treasurer
□Other:	Other:	□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 Find Viduals may be added to the index when filing your Florida Department of State Annual Report form.

sozasetasono Signature of Chairman, Vice Chairman, or any officer listed	1 in number 12 of the application)
(Digitatate of Charitman, The Charitman, of any officer note	

14. Shaelina Holmes, Executive Director

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



CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

HELLO SEVEN FOUNDATION

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 21st day of October, 2021, with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

Certification# 114397743-1 Reference# 19078124- Page: 1 of 1 Verify this certificate online at https://www.sosnc.gov/verification IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official scal at the City of Raleigh, this 10th day of October, 2022.

Elaine & Marshall

Secretary of State



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 1, 2022

LIZ VENNUM 1001 MOREHEAD SQUARE DRIVE STE 450 CHARLOTTE, NC 28203 US

SUBJECT: HELLO SEVEN FOUNDATION Ref. Number: W22000137505

We have received your document for HELLO SEVEN FOUNDATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 622A00024455

RECEIVED

www.sunbiz.org