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COVER LETTER

TO:	Registration Section Division of Corporations					
_	•					
SUBJECT: Adoption Choices Inc. Name of Corporation – must include suffix						
D 6.	·					
Dear Si	r or Madam:					
Affairs	closed "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 the above referenced not for profit corporation to conduct its affairs in Florida.					
Please	return all correspondence concerning this matter to the following:					
	Jeremy B. Spackman, Esq.					
	Name of Person					
	Oshins & Associates, LLC					
	Firm/Company					
	Firm/Company 1645 Village Center Circle, Suite 170					
	Address NV 20131					
	Las Vegas, NV 89134					
	City/State and Zip Code					
	Ginny@VirginiaLFrank.com					
	E-mail address: (to be used for future annual report notification)					
For furt	her information concerning this matter, please call;					
Chrissy	Sarrazin 702 341-6000 ext. 259 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 m	d is a check for the following amount: ake check payable to: FLORIDA DEPARTMENT OF STATE 10. Filling For a State of the following amount:					
■ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee,						

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:

(If name unav	railable in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Flo	orida)
Colorado	22	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	intry under the law of which it is incorporated)	(FEI number, if applicable)	
(Date of Incorporation) 5.	(Date of duration, if other than perpetual)	
Adoption Cho	· · · · · · · · · · · · · · · · · · ·	treet address) ingfield St. #320 Golden, CO 80401	
Adoption Cho	ices of Colorado: c/o Virginia Frank, Esq. 2801 You (Current mailing addi	ingfield St. #320 Golden. CO 80401	
	ices of Colorado: c/o Virginia Frank, Esq. 2801 You	ingfield St. #320 Golden. CO 80401 ress, if different) ions to organizations as exempt organization	
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charitable, rel (Purpose(s) of Name and str Name:	ices of Colorado: c/o Virginia Frank, Esq. 2801 You (Current mailing additions, educational and scientific purposes, distribution corporation authorized in home state or country to be seet address of Florida registered agent: (P.O. Bornes)	ingfield St. #320 Golden. CO 80401 ress, if different) ions to organizations as exempt organization e carried out in the state of Florida) ox NOT acceptable)	100 mm 200 mm 20
charitable, rel (Purpose(s) of Name and str Name:	ices of Colorado: c/o Virginia Frank, Esq. 2801 You (Current mailing addi- igious, educational and scientific purposes, distributi- corporation authorized in home state or country to be eet address of Florida registered agent: (P.O. Be Erica Healey Jeanne Tate Law Office, 418 W Platt Street, Suite	ingfield St. #320 Golden. CO 80401 ress, if different) ions to organizations as exempt organization e carried out in the state of Florida) ox NOT acceptable)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1

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. DIRECTOI □Chairman	Name: Rebecca Jamrozek	□Chairman	Patricia Fisher Name:
□ Vice Chairman	Address: 9156 Seven Arrows Trail	□Vice Chairman	Address: Longview Lane
□Director	Lone Tree, CO 80124	□Director	Mustang, OK 73064
■President		□President	
□Vice President		□Vice President	
☐ Secretary	☐ Treasurer	■ Secretary	□Treasurer
□Other:	Other:	□Other:	Other:
□Chairman	Name: Nisa Butler	□Chairman	Name:
□ Vice Chairman	Address: 6407 Enchanted Valley Dr.	□Vice Chairman	Address:
□Director	Reno, NV 89523	□Director	
□President		□President	2022
□Vice President		□Vice President	E CT 3
☐ Secretary	■ Treasurer	☐ Secretary	□Treasurer S → [[
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 indivi	Notice: Use an attachment to report more than siduals may be added to the index when filing you will be a signature of Chairman, Vice Chairman, or any Company of Chairman or printed name and capacity of	ur Florida Department of	State Annual Report form. 26/22 2 of the application)

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

ADOPTION CHOICES INC.

is a

Nonprofit Corporation

formed or registered on 05/28/2002 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20021142189.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 10/25/2022 that have been posted, and by documents delivered to this office electronically through 10/26/2022 @ 09:02:26.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 10/26/2022 @ 09:02:26 in accordance with applicable law. This certificate is assigned Confirmation Number 14416756



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, https://www.coloradosay.gov/hiz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, https://www.coloradosay.gov/click"Businesses, trademarks, trade names" and select "Frequently Asked Questions"