

F22-0000007736

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

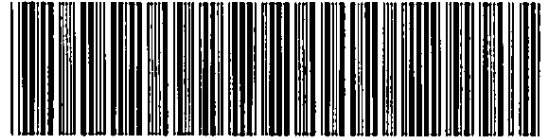
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S. FRANKLIN

DEC 20 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FRuits of Life, 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:

Tene' K. KosmyNA  
Name of Person

FRuits of Life, Inc.  
Firm/Company

228 Amberjack Drive, Unit 11  
Address

FORT WALTON BEACH, FL 32548  
City/State and Zip Code

TRaining For Your Success @ Gmail . com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tene' K. KosmyNA at (850) 362-7489  
Name of Person 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. Fruits of Life, 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.)

~~FRUITS OF LIFE~~ FRUITS OF LIFE Florida, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Michigan

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

3. 45-2865712

(FEI number, if applicable)

4. APRIL 11 2016

(Date of Incorporation)

5. Perpetual

(Date of duration, if other than perpetual)

6. Nothing has been conducted yet.

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)

7. 228 Amberjack Drive, Unit 11, Fort Walton Beach, 32548

(Principal office street address)

228 Amberjack Drive, Unit 11, Fort Walton Beach, FL 32548

(Current mailing address, if different)

8. See attachments Labeled Purpose and General Nature and Article II continued

(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: Jene' K. Kosmyna

Office Address: 228 Amberjack Drive, Unit 11, Fort Walton Beach, FL.

FWB, FL

(City)

Florida

32548

(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.*

Jene' K. Kosmyna

(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. DIRECTORS**

☐ Chairman Name: Tene' K. KosmyNA  
☐ Vice Chairman Address: 228 Amberjack Drive  
☒ Director Unit 11  
☒ President FWB, FL 32548  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Sharon Y. Moore  
☐ Vice Chairman Address: 5517 Grayton Road  
☒ Director Detroit, MI 48224  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

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

☐ Chairman Name: Stephen J. KosmyNA  
☐ Vice Chairman Address: 228 Amberjack Drive  
☒ Director Unit 11  
☐ President FWB, FL 32548  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Sandra S. Hurd  
☐ Vice Chairman Address: 1837 Sparrow Lane  
☒ Director NAVARRE, FL 32566  
☐ 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. Tene' K. KosmyNA  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

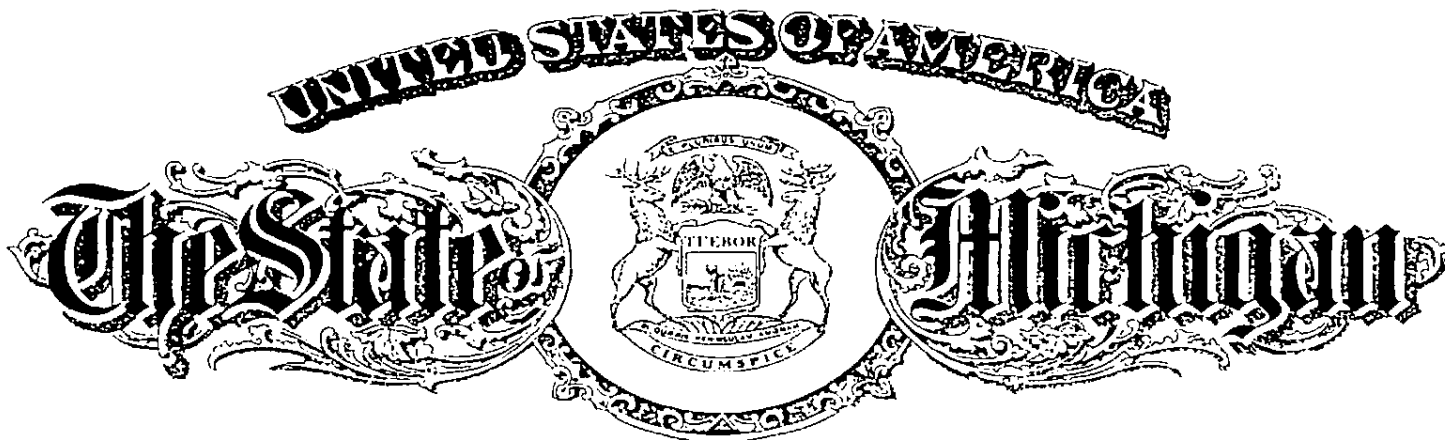
14. Tene' K. KosmyNA  
(Typed or printed name and capacity of person signing application)

## Purpose and General Nature Statement

Fruits of Life, Inc. was established to provide workforce, business, and organizational development soft skills training and education, including vocational rehabilitation to disadvantaged individuals including seniors, in urban communities, and to other individuals and groups who have been traditionally underserved in these areas. The purpose of this organization also includes being a provider and support mechanism, through education, training, and providing equipment and supplies; for those affected with type 2 diabetes and other health challenges and ailments inclusive of those who are disabled, handicapped, have special needs or are senior citizens. This encompasses and includes spirituality, spiritual training and lessons, spiritual education, and counseling.

Additional charitable purposes of this corporate are identified in the attachment labeled Article II, Continued.

2020-19 PM 7:16



Department of Licensing and Regulatory Affairs

Lansing, Michigan

*This is to Certify That*

*FRUITS OF LIFE, INC.*

*was validly Incorporated on April 11 , 2016 as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state.*

*This certificate is issued pursuant to the provisions of 1982 PA 162 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.*

*In testimony whereof, I have hereunto set my hand,  
in the City of Lansing, this 7th day of November , 2022.*

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 10, 2022

TENE K KOSMYNA  
228 AMBERJACK DRIVE UNIT 11  
FORT WALTON BCH, FL 32548 US

SUBJECT: FRUITS OF LIFE, INC.  
Ref. Number: W22000152370

We have received your document for FRUITS OF LIFE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Corporation," "Inc.," or "Corp." Sections 617.0401(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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: 922A00027487

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