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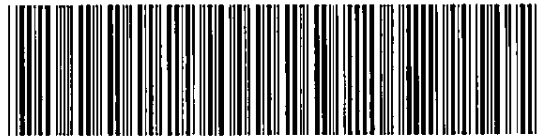
(Business Entity Name)

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TALLAHASSEE, FLORIDA

JAN 31 2023
K. Brumby

CT CORP**3458 Lakeshore Drive, Tallahassee, FL 32312****850-656-4724****Date:** 01/31/2022

Acc#I20160000072

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Name:	M.E.B. Alliance for Educator Diversity, Inc.
Document #:	
Order #:	14744782 - 22

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

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Email Address for Annual Report Notifications:

drherring@educatordiversity.org

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **70.00****Thank you!**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M.E.B. Alliance for Educator Diversity, 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:

Cassandra Herring

Name of Person

M.E.B. Alliance for Educator Diversity, Inc.

Firm/Company

200 Berry Hill Lane

Address

Tyrone, GA 30290

City/State and Zip Code

drherring@educatordiversity.org

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

For further information concerning this matter, please call:

Jackson Stoffer

at (404) 322-6652

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. M.E.B. Alliance for Educator Diversity, 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.)

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

2. Texas 3. 81-4012999
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 09/28/2016 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. 09/03/2021
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 200 Berry Hill Lane, Tyrone, GA. 30290
(Principal office street address)

(Current mailing address, if different)

8. Promote Educator Diversity
(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: C T Corporation System

Office Address: 1200 S Pine Island Rd #250

Plantation, Florida 33324
(City) (Zip Code)

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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. DIRECTORS

☐ Chairman Name: Dr. Cassandra Herring
☐ Vice Chairman Address: 200 Berry Hill Lane, Tyrone, GA
☐ Director 30290
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: CEO ☐ Other: _____

☐ Chairman Name: Cheryl Coleman
☐ Vice Chairman Address: 200 Berry Hill Lane, Tyrone, GA
☐ Director 30290
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Edie Morris
☐ Vice Chairman Address: 200 Berry Hill Lane, Tyrone, GA
☐ Director 30290
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: CFO ☐ Other: _____

☒ Chairman Name: Dr. Frank Gettridge
☐ Vice Chairman Address: 200 Berry Hill Lane, Tyrone, GA
☒ Director 30290
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Allana Jackson
☐ Vice Chairman Address: 200 Berry Hill Lane, Tyrone, GA
☒ Director 30290
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Jim Larimore
☐ Vice Chairman Address: 200 Berry Hill Lane, Tyrone, GA
☒ Director 30290
☐ 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. Dr. Cassandra Herring
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Dr. Cassandra Herring, CEO
 (Typed or printed name and capacity of person signing application)



Branch Alliance for Educator Diversity

List of Additional Directors

Board of Directors
Dr. John Luczak Address: 200 Berry Hill Lane, Tyrone, GA 30290
Dr. Curtis E. Martin Address: 200 Berry Hill Lane, Tyrone, GA 30290
Dr. Vicki Phillips Address: 200 Berry Hill Lane, Tyrone, GA 30290
Kathryn Schotthoefer Address: 200 Berry Hill Lane, Tyrone, GA 30290
Peter Shulman Address: 200 Berry Hill Lane, Tyrone, GA 30290

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

M.E.B. Alliance for Educator Diversity, Inc.
a Foreign Nonprofit Corporation

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 : 24383736
Date Inc/Auth/Filed: 07/05/2022
Jurisdiction : Texas
Print Date : 01/25/2023
Form Number : 211



Brad Raffensperger

Brad Raffensperger
Secretary of State

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Jane Nelson
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for M.E.B. Alliance for Educator Diversity, Inc. (file number 802551868), a Domestic Nonprofit Corporation, was filed in this office on September 28, 2016.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 26, 2023.



A handwritten signature of Jane Nelson in black ink.

Jane Nelson
Secretary of State