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(Requestor's Name)				
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(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
Certified Copies Certificates of Status				
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COVER LETTER

TO:	Registration Section Division of Corpora	tions	
SUBJ	ECT: Animal	Ambassadors Name of Corporation – m	Inc. just include suffix
Dear S	ir or Madam:		
Affairs	s in Florida", "Certificat	e of Existence", or "Certific	oration for Authorization to Conduct its ate of Status" and check are submitted to conduct its affairs in Florida.
Please	return all corresponden	ce concerning this matter to	the following:
	Li	nda Telling To Name of Person	in-Jones
		nimal Amb	assadors Inc
	13960	157th COL	art N.
	Jupi	Ter F1 3	3478
		City/State and Zip	Code
	E-mail ad	egen 6 Ko	ona. Netannual report notification)
For fur	ther information concer	ming this matter, please call	:
	Name of Per	Ton-Jones at (8) Area (OS 989-3080 Daytime Telephone Number
	Mailing Address: Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions E T 14 2	treet Address: Registration Section Division of Corporations The Centre of Tallahassee 415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

□\$78.75 Filing Fee & Certified Copy

□\$87.50 Filing Fee,

Certified Copy

Certificate of Status &

Enclosed is a check for the following amount:

\$70.00 Filing Fee

Please make check payable to: FLORIDA DEPARTMENT OF STATE

□\$78.75 Filing Fee &

Certificate of Status

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA ST REGISTER A FOREIGN NOT FOR PROFIT CORPORATIO THE STATE OF FLORIDA:	FATUTES, THE FOLLOWING IS SUBMITTED TO ON FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
animal amborradora	ne.
(Name of corporation: must include the word "INCORPORATEI import in language as will clearly indicate that it is a corporation in the name at present. "Company" or "Co." may not be used as a	D" or "CORPORATION" or words or abbreviations of like instead of a natural person or partnership if not so contained
animal ambourders	Indoonational Are
(If name unavailable in Florida, enter alternate corporate name a	adopted for the purpose of transacting business in Florida)
2. (State or country under the law of which it is incorporated)	85-0383864
, 1	(FEI number, if applicable)
4. <u>2/15//990</u> 5. (Date of Incorporation)	(Date of duration, if other than perpetual)
W/a	(Date of dutation, it office than perpendict)
6. (Date first conducted affairs in Florida if prior to registration. See se	ections 617,1501 & 617,1502, F.S. to determine penalty liability.)
7. 13964 157th Ct N Jupiter, FL 3: (Principal office	street address)
1713 State Rd 502 Santa Fe, NM	
8. Education about Ttouch (Purpose(s) of corporation authorized in home state or country to	
9. Name and street address of Florida registered agent: (P.O.	Box NOT acceptable)
Name: Linda Tellinaton - Jones	<u></u>
	<u> </u>
Office Address: 13964 157 th Ct. N.	22/170
Jupiller (City)	, Florida 33478 ====================================
U . (3.1)	2
10. Registered agent's acceptance: Having been named as registered agent and to accept servic designated in this application, I hereby accept the appointm further agree to comply with the provisions of all statutes re and I am familiar with and accept the obligations of my pos	ent as registered agent and agree to act in this capacity. I elative to the proper and complete performance of my duties,
Z Te	elligh
(Registered ag	ent's signature)
11. Attached is a certificate of existence duly authenticated, the Department of State, by the Secretary of State or othe jurisdiction under the law of which it is incorporated.	not more than 90 days prior to delivery of this application to er official having custody of corporate records in the

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTO			•
□Chairman	Name: Linda Cellington-Jones	□Chairman	Name: Alabyn Hood
□Vice Chairman	Address: 13964 157 4 Ct. 72.	□Vice Chairman	Address: 5435 Rochdell Rd
□Director	Jupiter FL 33478	□Director	Cold Stream BC V1B 3E8
⊠ President		□President	
□Vice President		▼Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other:	☐ Other:	Other:	Other:
☐ Chairman	Name: Roland Kleger	□ Chairman	Name:
□Vice Chairman	Address: 13964 157th Ct. N.	□Vice Chairman	
□Director	Superter, FL 33478	□Director	
□President		□President	
□Vice President		□Vice President	
⊠ Secretary	⊠ Treasurer	□Secretary	□Treasurer
Other:	☐ Other:	Other:	Other:
□Chairman	Name:	□ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		Director	
□President	<u> </u>	☐ President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	Secretary	□Treasurer
□Other:	☐ Other:	Other:	Other:
Non-indexed indiv	Notice: Use an attachment to report more than six riduals may be added to the index when filing your when filing your (Signature of Chairman, Vice Chairman, or any of the Telling Ton — Jones (Typed or printed name and capacity of persons)	Florida Department of	of State Annual Report form. 12 of the application)



Certificate of Good Standing and Compliance

IT IS HEREBY CERTIFIED THAT:

ANIMAL AMBASSADORS INC. 1468735

the above named entity, a Corporation incorporated under the laws of New Mexico, is duly authorized to transact business in New Mexico as a Domestic Nonprofit Corporation, under the

Nonprofit Corporation Act

53-8-1 to 53-8-99 NMSA 1978

having filed its Articles of Incorporation on February 15, 1990, and Certificate of Incorporation issued as of said date.

It is further certified that the fees due to the Office of the Secretary of State which have been assessed against the above named entity have been paid to date and the entity is in good standing and duly authorized to transact business as its existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

Certificate Issued: December 2, 2022

In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the City of Santa Fe, and the seal of said office to be affixed hereto.

Maggie Toulouse Oliver Secretary of State

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Certificate Validation #: 0071482