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(Address)

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S. FRANKLIN
MAR 11 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: I See You Family and Community Services, 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:

Monica Butler

Name of Person

I See You Family and Community Services

Firm/Company

2040 Britains Lane

Columbus , OH 43224

Address

Columbus OH 43224

City/State and Zip Code

monica@mrbinstitute.com

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

For further information concerning this matter, please call:

Monica Butler

Name of Person

at (**614**) **506-1823**

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. I See You Family and Community Services, 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. Ohio 3. 87-4165213
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/27/2021 5. perpetual
(Date of Incorporation) (Date of duration, if other than perpetual)

6. 11/07/2022
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 2040 Britains Lane Columbus OH 43224
(Principal office street address)

(Current mailing address, if different)

8. (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
Has corporation's organized and solely for charitable, religious, education and scientific purposes, to help families achieve their highest accomplishments by providing education, cultural and mental health resources, including for such purposes, the making of gifts and donations to a

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Registered Agents Inc
Office Address: 7901 4th St N STE 300
St. Petersburg, Florida 33702
(City) (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.

David Roberts

(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: Monica Butler
☐ Vice Chairman Address: 1158 Bulen Ave Columbus, OH 43206
☒ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Kim Robinson
☐ Vice Chairman Address: 4176 Astor Ave Columbus, OH 43227
☐ Director _____
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: George Reese
☐ Vice Chairman Address: 2708 Petzinger Rd Columbus, OH 43209
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Teresa B Blakenship
☐ Vice Chairman Address: 2733 Talisman Ct Columbus, OH 43209
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Sgt at Arms ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ 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. [Signature]
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Monica Butler
(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show I SEE YOU FAMILY AND COMMUNITY SUPPORT, INC , an Ohio not for profit corporation, Charter No. 4793124, having its principal location in Canal Winchester, County of Franklin, was incorporated on December 27, 2021 and is currently in GOOD STANDING upon the records of this office.



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 2nd day of March, A.D. 2023*

A handwritten signature in cursive script, appearing to read "Frank LaRose".

Ohio Secretary of State

Validation Number: 202306102382



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2023

MONICA BUTLER
2040 BRITAINS LANE
COLUMBUS, OH 43224 US

SUBJECT: I SEE YOU FAMILY AND COMMUNITY SERVICES
Ref. Number: W23000011941

We have received your document for I SEE YOU FAMILY AND COMMUNITY SERVICES and your check(s) totaling \$87.50. 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 jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

The document must contain a statement containing the purpose(s) authorized by the jurisdiction of its incorporation, of which it intends to pursue in this state, pursuant to 617.1503(d), Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

Each officer should be separated w/ there address, title and name.

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

RECEIVED

MAR 07 2023