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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Account Number : I20200000117 Phone : (407)278-1552 Fax Number : (407)857-9309

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Email Address: <a href="mailto:charlesfrederick75@hotmail.com">charlesfrederick75@hotmail.com</a>

### FOREIGN PROFIT/NONPROFIT CORPORATION

Golden Lotus Retreat, Inc.

	Golden 170
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### 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	ailable in Florida, enter alternate co	orporate name adopted for the purpose of transacting business in Florida)	<u>,                                     </u>
	•	, , , , , , , , , , , , , , , , , , ,	,
Nevada		3. 85-2079318 (FEI number, if applicable)	
(State or cou	intry under the law of which it is in	corporated) (FEI number, if applicable)	
July 1, 2020		5.	_
(1	Date of Incorporation)	5. (Date of duration, if other than perpetual)	
Data first gard	hierard official in Charles if emine to see	gistration. See sections 617.1501 & 617.1502, F.S. to determine penalty liab	.:::::::::\
			nage. j
210, Mt, Pincy	y Ave. NE, St. Petersburg, FL 3370	)2	_
	(	Principal office <u>street</u> address)	
	(Cui	rrent mailing address, if different)	_
To serve Self-	Realization Fellowship by providir	ne facilities for individual or group retreats on a donation-only basis	
To serve Self- Purpose(s) of	Realization Fellowship by providir	ng facilities for individual or group retreats on a donation-only basis.	20
		ng facilities for individual or group retreats on a donation-only basis.  te or country to be carried out in the state of Florida)	3023 ⊭
		ng facilities for individual or group retreats on a donation-only basis.  Ite or country to be carried out in the state of Florida)	2023 ₩ 8 Y
Name and <u>str</u>	eet address of Florida registered	lagent: (P.O. Box NOT acceptable)	7023 MAY 1-
Name and <u>str</u>	eet address of Florida registered	lagent: (P.O. Box NOT acceptable)	
Name and <u>str</u>	eet address of Florida registered	lagent: (P.O. Box NOT acceptable)	
Name and <u>str</u>	eet address of Florida registered	lagent: (P.O. Box NOT acceptable)	
Name and <u>str</u>	eet address of Florida registered	lagent: (P.O. Box NOT acceptable)	
Name and <u>str</u> Name: Tice Address:	Patricia Liles Bradford  210. Mt. Pincy Avc. NE  St. Petersburg  (City)	I agent: (P.O. Box NOT acceptable)	
Name and <u>str</u> Name:  Fice Address:  Registered	Patricia Lifes Bradford  210. Mt. Pincy Avc. NE  St. Petersburg  (City)  Lagent's acceptance:	A REPORT ASSESSED TO THE PORT OF THE PORT	D
Name and <u>str</u> Name: Tee Address:  Registered ving been not ignated in the	Patricia Liles Bradford  210. Mt. Pincy Avc. NE  St. Petersburg  (City)  Lagent's acceptance: uned as registered agent and to	Hagent: (P.O. Box NOT acceptable)  ARCHARD  ARCH	place
Name and <u>str</u> Name:  fice Address:  . Registered ving been noting the street in the street to the	Patricia Lifes Bradford  210. Mt. Pincy Ave. NE  St. Petersburg  (City)  Lagent's acceptance: amed as registered agent and to this application, I hereby accept to comply with the provisions of	A lagent: (P.O. Box NOT acceptable)    A lagent: (P.O. Box NOT acceptable)   A lagent: (P.O. Box NOT accepta	place
Name and <u>str</u> Name: Tice Address:  D. Registered wing been not signated in the ther agree to	Patricia Lifes Bradford  210. Mt. Pincy Ave. NE  St. Petersburg  (City)  Lagent's acceptance: amed as registered agent and to this application, I hereby accept to comply with the provisions of	Hagent: (P.O. Box NOT acceptable)  ARCHARD  ARCH	place
Name and <u>str</u> Name: Tice Address:  D. Registered wing been not signated in the ther agree to	Patricia Lifes Bradford  210. Mt. Pincy Ave. NE  St. Petersburg  (City)  Lagent's acceptance: amed as registered agent and to this application, I hereby accept to comply with the provisions of	A lagent: (P.O. Box NOT acceptable)    A lagent: (P.O. Box NOT acceptable)   A lagent: (P.O. Box NOT accepta	place
Name and <u>str</u> Name:  Tice Address:  O. Registered aving been naving been navignated in the other agree to	Patricia Lifes Bradford  210. Mt. Pincy Ave. NE  St. Petersburg  (City)  Lagent's acceptance: amed as registered agent and to this application, I hereby accept to comply with the provisions of	A lagent: (P.O. Box NOT acceptable)    A lagent: (P.O. Box NOT acceptable)   A lagent: (P.O. Box NOT accepta	place

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.

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

A. DIRECTOR					
□Chairman	Charles Frederick Name:	□Chairman	Nume:		
∐Vice Chairman	Address: 544 Parkson Road #E	_JVice Chairman	Address:		
ElDirector Henderson, NV 89011		[]Director		<del></del>	
President		□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	☐ Secretary	∃Treasurer		
□Other:	☐ Other:	□ Other;	☐ Other:_		
☐ Chairman	Nume: Patricia Bradford	□Chairman	Name:		
☐Vice Chairman	Address: 210 Mt. Piney Ave NE	□Vice Chairman	Address:		
□Director	St. Petersburg, FL 33702	□Director			
□President		Ti President			
☐ Vice President		Il Vice President			
□Secretary	Treasurer	□Secretary	□Treasure	er .	
Other:	☐ Other:	□Other:	Other:_		
□ Chairman	Name: Amber Stodart	□Chairman	Name: OF	2023	
□Vice Chairman	Address: 1851 Montana Ave NE	□Vice Chairman	Address:		
□Director	St. Petersburg, FL 33703	≟Director			
△IPresident		HPresident	SSEE	<u> </u>	
CIVice President		_IIVice President		्र हा <b>प</b>	
■ Secretary	[]Treasurer	□Secretary	Treasure		
□Other:		Chher:	\pi\text{Other_}		
Non-indexed indiv	t Notice: Use an attachment to report more than eiduals may be added to the index when filing you while.  (Signature of Chairman, Vice Chairman, or any erick, President  (Typed or printed name and capacity of	our Florida Department o	f State Annual Report form  12 of the application)		

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#### ADDITIONAL PROVISIONS

#### Golden Lotus Retreat

#### **DISSOLUTION CLAUSE**

Upon dissolution of the Corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or state or local government for public purpose.

#### **OPERATION PROVISION**

The Corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including for such purposes, the making of distributions to organizations that qualify as an exempt organization under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

No substantial part of the activities of the corporation shall consist of the carrying on of propaganda or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in, any political campaign on behalf of any candidate for public office.

Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

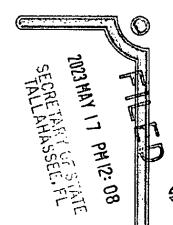
The property of this corporation is irrevocably dedicated to charitable purposes and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, officer, or member thereof or to the benefit of any private person.



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## SECRETARY OF STATE





# CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I. FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada standing Revised Statutes which are either presently in a status of good standing or were in good for a time period subsequent of 1976 and am the proper officer to execute this certificate.

1 further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, GOLDEN LOTUS RETREAT, as a DOMESTIC NONPROFIT CORPORATION (82) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 07/21/2020, and is in good standing in this state.

I further certify that the above DOMESTIC NONPROFIT CORPORATION (82) has its formation document and no amendments on file in this office as of the date of this certificate.



Certificate Number: B202305173657710

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 05/17/2023.

FRANCISCO V. AGUILAR Secretary of State