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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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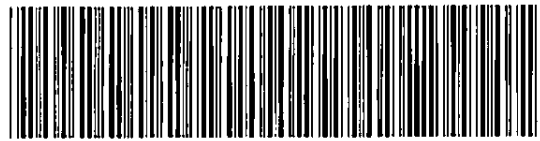
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Cl. Brumby

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rooted & Connected Corporation
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:

Deborah L. Bearden
Name of Person
Rooted & Connected Corp.
Firm/Company

9427 Sarazen Place
Address
Palmetto, FL 34221
City/State and Zip Code

rootedandconnected@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah Bearden at (314) 412-3893
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**

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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. Rooted & Connected Corporation
(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.)

Rooted and Connected Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Missouri 3. N000707283
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. January 2018 5. Yearly renewal
(Date of incorporation) (Date of duration, if other than perpetual)

6. Currently planned for July 2023
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 9427 Sarazen Place, Palmetto, FL 34221
(Principal office street address)

(Current mailing address, if different)

8. To host topical gatherings for women encouraging connection growth and value
(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: Deborah Bearden
Office Address: 9427 Sarazen Place
Palmetto, Florida FL 34221
(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.

Deborah L. Bearden
(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

<input type="checkbox"/> Chairman	Name: <u>Shari Busha</u>	<input type="checkbox"/> Chairman	Name: <u>Debra Gondier</u>
<input type="checkbox"/> Vice Chairman	Address: <u>18516 Marlin Kite</u>	<input type="checkbox"/> Vice Chairman	Address: <u>18708 Engenada Dr.</u>
<input type="checkbox"/> Director	<u>N. Ft. Myers, FL</u>	<input type="checkbox"/> Director	<u>Naples, FL</u>
<input checked="" type="checkbox"/> President	<u>33917</u>	<input type="checkbox"/> President	<u>34114</u>
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Other: <u>Advisory Board</u>	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Chairman	Name: <u>Deborah Bearden</u>	<input type="checkbox"/> Chairman	Name: <u>Jana Crenshaw</u>
<input type="checkbox"/> Vice Chairman	Address: <u>9427 Sarazen Place</u>	<input type="checkbox"/> Vice Chairman	Address: <u>120 10th Ave NW</u>
<input type="checkbox"/> Director	<u>Palmetto, FL</u>	<input type="checkbox"/> Director	<u>Naples, FL</u>
<input type="checkbox"/> President	<u>34221</u>	<input type="checkbox"/> President	<u>34120</u>
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input checked="" type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Other: <u>Advisory Board</u>	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Chairman	Name: <u>Carl Bearden</u>	<input type="checkbox"/> Chairman	Name: <u>Kimberly Donaldson</u>
<input type="checkbox"/> Vice Chairman	Address: <u>9427 Sarazen Place</u>	<input type="checkbox"/> Vice Chairman	Address: <u>608 Geiser Brook Ct</u>
<input type="checkbox"/> Director	<u>Palmetto, FL</u>	<input type="checkbox"/> Director	<u>Lake St-Louis, MO</u>
<input type="checkbox"/> President	<u>34221</u>	<input type="checkbox"/> President	<u>63367</u>
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input checked="" type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Other: <u>Adv. Board</u>	<input type="checkbox"/> 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. Deborah L. Bearden
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Deborah L. Bearden, Secretary
(Typed or printed name and capacity of person signing application)

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

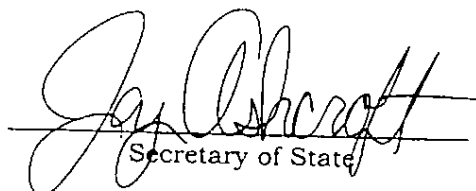
CERTIFICATE OF RESCISSION

I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, hereby certify that the forfeiture/administrative dissolution entered against

Rooted & Connected
N000707283

on 10/18/2022, as provided in the State of Missouri Nonprofit Corporation Act was this day rescinded, and said corporation was on this date hereby restored to good standing in the records of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 20th day of April, 2023.


Secretary of State

