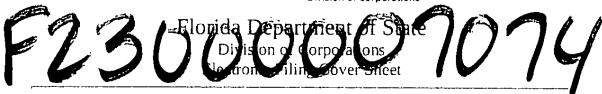
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:				



FOREIGN PROFIT/NONPROFIT CORPORATION SAFE PASSAGES

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

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. SAFE PASSA					
(Name of corporation in the name at	oration: must include the word "INCORPORA hage as will clearly indicate that it is a corporat present. "Company" or "Co." may not be used	TED" or "CORPORATION" or words or abb ion instead of a natural person or partnership as a corporate suffix by a nonprofit corporation	reviation if not so on.)	is of like containe	; ad
SAFE PASSAC	GES INC.				
(If name unav	railable in Florida, enter alternate corporate nat	me adopted for the purpose of transacting bus	iness in I	Florida)	-
2. California		3 20-4535835			
(State or cou	intry under the law of which it is incorporated)	3, 20-4535835 prporated) (FEI number, if applicable)			-
00/01/0000					
	(Date of Incorporation) 5. (Date of duration, if other than perpetual))	-
5 ,					
(Date first cond	lucted affairs in Florida if prior to registration. So	ve sections 617 1501 & 617.1502, F.S. to deterr	nine pem	alty liabit	liny.)
			•	•	-
7.	STE 300 St. Petersburg, FL 33702	fice street address)			-
	(Timeljan Oi	nee street address)			
1017 Clay Stre	et Oakland, CA 94607				
	(Current mailin	g address, if different)			-
to develop C	HARITABLE and EDUCATIONAL projects	for the public benefit of all California resi	dents		
(Purpose(s) of	corporation authorized in home state or countr	y to be carried out in the state of Florida)			•
				073	
). Name and <u>str</u>	reet address of Florida registered agent: (P	.O. Box NOT acceptable)		2023 DE	
				\Box	
Name:	Registered Agents Inc		•	22	
Office Address:	7901 4th St N STE 300			-0	
	St. PEtersburg	Florida 33702		7	
	(City)	, Florida 33702 (Zip Code)		†	
	• •		•	<u>ن</u>	

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.

Javid Cherts
(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. DIRECTOR					
LJChairman	Name:	∪Chairman	Perez, Alicia Name: Address:		
□Vice Chairman	Address:	□ Vice Chairman			
☑ Director 7901 4th St N STE 300		☑ Director	7901 4th St N STE 300		
□President	St. Petersburg, FL 33702	□President	St. Petersburg, FL 33702		
□Vice President		□ Vice President			
Secretary	□Treasurer	□ Secretary	☐ Treasurer		
□Other:	Other:	□Other:	Other:		
□Chairman	Name: Ramirez Gonzalez, Carmen	□ Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
☑Director	7901 4th St N STE 300	☐ Director			
□President	St. Petersburg, FL 33702	□President			
□Vice President		□ Vice President	7,045		
□Secretary	□Treasurer	☐ Secretary	□Treasurer		
Other:	☐ Other:	□Other:	Other:		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□ Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□ Vice President			
□ Secretary	□Treasurer	□ Secretary	☐ Treasurer		
□Other:	Other:	□ Other:	□Other:		
Non-indexed indiv	Notice: Use an attachment to report more that iduals may be added to the index when filing to the index when it is index when i	your Florida Department o	f State Annual Report form. 12 of the application)		

12/22/2023 05:51:35 PST To: 18506176383 Page: 4/4 From: Registered Agents Inc Fax: 8134365206



I, SHIRLEY N. WEBER, Ph.D., California Secretary of State, hereby certify:

Entity Name: SAFE PASSAGES

 Entity No.:
 2868332

 Registration Date:
 03/01/2006

Entity Type: Nonprofit Corporation - CA - Public Benefit

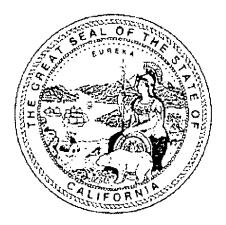
Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 12, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 165368129

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.