F24000002933

(Paguastara Nama)					
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



100429545691

05/09/24--01022--002 **78.75

RENO&CAVANAUGHPLLC

May 7, 2024

Madisson Davis (615) 457-8528 mdavis@renocavanaugh.com

<u>VIA UPS</u>

Division of Corporations Attn: Registration The Centre of Tallahassee 2415 N. Monroe Street Suite 810 Tallahassee, FL 32303

RE: Cherry Village R&C File No. TN533-138

To Whom It May Concern:

Enclosed, please find the following for filing with the Florida Department of State:

- 1. Our Check No. 009257 in the amount of \$78.75 payable to Florida Department of State in payment of Filing Fees.
- 2. A copy of the Authorization to Conduct Business in Florida Application (WCO Cherry Village GP, Inc.)
- 3. A copy of the Certificate of Existence for WCO Cherry Village GP, Inc.

Additionally, enclosed please find a return envelope and UPS label to utilize when sending the filed documents back to our office.

Should you have any questions, please do not hesitate to contact me at the number shown above.

Sincerely,

RENO & CAVANAUGH, PLLC

Madisson Davis, Legal Assistant

COVER LETTER

TO:	Registration Section Division of Corporations					
emb n	CCT: WCO Cherry Village GP, Inc.					
SODJI	Name of Corporation – must include suffix					
Dear Si	r or Madam:					
Affairs	losed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to the above referenced not for profit corporation to conduct its affairs in Florida.					
Please	eturn all correspondence concerning this matter to the following:					
	Anthony Woodham					
	Name of Person					
	Woodbine Community Organization					
	Firm/Company					
	643 Spence Lane					
	Address					
	Nashville, TN 37217					
	City/State and Zip Code					
	twoodham@woodbinecommunity.org					
	E-mail address: (to be used for future annual report notification)					
For furt	ner information concerning this matter, please call:					
Anthor	y Woodham 615 850-3457 at ()					
	Name of Person Area Code Daytime Telephone Number					
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303					
Please m	d is a check for the following amount: ake check payable to: FLORIDA DEPARTMENT OF STATE OF Filing Fee \$\Bigsim \$\\$78.75 \text{Filing Fee & }\Bigsim \$\\$87.50 \text{Filing Fee}. Certificate of Status Certified Copy 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:

Tennessee		3. 86-3395575 (FEI number, if applicable)
(State or cou	•	· · · · · · · · · · · · · · · · · · ·
April 9, 2024		5. (Date of duration, if other than perpetual)
I)	Date of Incorporation)	(Date of duration, if other than perpetual)
April 9, 2024		
Date first cond	ucted affairs in Florida if prior to regi	stration. See sections 617.1501 & 617.1502, F.S. to determine penalty liabil
543 Spence La	ine, Nashville, TN 37217	
		rincipal office street address)
	(Curr	ent mailing address, if different)
	·	,
	veloping, and managing affordable h	ousing projects.
	veloping, and managing affordable h	,
Purpose(s) of	veloping, and managing affordable le corporation authorized in home state	ousing projects. e or country to be carried out in the state of Florida)
Purpose(s) of	veloping, and managing affordable le corporation authorized in home state	nousing projects. e or country to be carried out in the state of Florida) agent: (P.O. Box NOT acceptable)
Purpose(s) of	veloping, and managing affordable he corporation authorized in home state eet address of Florida registered	nousing projects. e or country to be carried out in the state of Florida) agent: (P.O. Box NOT acceptable)
Purpose(s) of lame and str Name:	veloping, and managing affordable becorporation authorized in home state eet address of Florida registered Shane Sarver	nousing projects. e or country to be carried out in the state of Florida) agent: (P.O. Box NOT acceptable)
Purpose(s) of lame and str Name:	veloping, and managing affordable becorporation authorized in home state eet address of Florida registered Shane Sarver 4488 Heaton Park Trail	agent: (P.O. Box NOT acceptable)
Purpose(s) of lame and str Name:	veloping, and managing affordable becorporation authorized in home state eet address of Florida registered Shane Sarver 4488 Heaton Park Trail Viera	agent: (P.O. Box NOT acceptable)
Purpose(s) of lame and str Name:	veloping, and managing affordable becorporation authorized in home state eet address of Florida registered Shane Sarver 4488 Heaton Park Trail	agent: (P.O. Box NOT acceptable) Florida 32955
Purpose(s) of a lame and str Name: ce Address:	veloping, and managing affordable becorporation authorized in home state eet address of Florida registered Shane Sarver 4488 Heaton Park Trail Viera (City)	agent: (P.O. Box NOT acceptable)
Purpose(s) of old ame and stream Name: ice Address:	veloping, and managing affordable becorporation authorized in home state eet address of Florida registered Shane Sarver 4488 Heaton Park Trail Viera (City) agent's acceptance:	agent: (P.O. Box NOT acceptable) Florida Florida Gip Code)
Purpose(s) of a lame and structure in the lame and structure ice Address: Registered in the lame and the lame and the lame and the lame are also a	celoping, and managing affordable becorporation authorized in home state eet address of Florida registered Shane Sarver 4488 Heaton Park Trail Viera (City) agent's acceptance: uned as registered agent and to its application. I hereby accept to	agent: (P.O. Box NOT acceptable) Florida 32955

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	total and the analysis of the same		The man Dominh				
□ Chairman	Name:	□ Chairman	Name: Thomas Derrick				
□ Vice Chairman	Address: 643 Spence Lane	□Vice Chairman	Address: 643 Spence Lane				
□Director	Nashville, TN 37217	Director	Nashville, TN 37217				
President		□President					
□Vice President	-	□Vice President					
□Secretary	□Treasurer	□Secretary	□Treasurer				
□Other:	Other:	□Other:	□Other:				
□Chairman	Name: Glen Page	□Chairman	Name:				
□Vice Chairman	Address: 643 Spence Lane	□Vice Chairman	Address:				
■Director	Nashville, TN 37217	□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		□President					
□Vice President		□Vice President					
☐ Secretary	□Treasurer	□Secretary	Treasurer				
□Other:	☐ Other:	□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. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Anthony Woodham, President (Typed or printed name and capacity of person signing application)							



Division of Business Services **Department of State**

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

RENO AND CAVANAUGH, PLLC

April 26, 2024

SUITE 2910 424 CHURCH STREET NASHVILLE, TN 37219

Request Type: Certificate of Existence/Authorization

Issuance Date: 04/26/2024

Copies Requested:

Request #:

0580704

Document Receipt

Receipt #: 008964438

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3872910190

\$20.00

Regarding:

WCO Cherry Village GP, Inc.

Filing Type:

Nonprofit Corporation - Domestic

Formation/Qualification Date: 04/08/2021

Status:

Active

Duration Term:

Perpetual

Business County: DAVIDSON COUNTY

Control #:

1187878

Date Formed:

04/08/2021

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

WCO Cherry Village GP, Inc.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Cert Web User Verification #: 067223527