

F98000002676

TRANSMITTAL LETTER

TO: Qualification/Registration Section
Division of Corporations

SUBJECT: LIFELINE AFRICA FOUNDATION (d.b.a. AFRILIFE INTERNATIONAL)
(Name of Corporation)

300002464813--8
-03/23/98-01053-003
*****70.00 *****70.00

Dear Sir or Madam:

W98-6383

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.

Please return all correspondence concerning this matter to the following:

CHRIS C. ELIAS
(Name of Person)
AFRILIFE INTERNATIONAL
(Firm/Company)
1333 HOWE AVE, SUITE 100
(Address)
SACRAMENTO, CA 95825
(City, State and Zip Code)

RECEIVED
MAY 11 PM 3:08
TALLAHASSEE, FLORIDA
SECRETARY OF REVENUE

5/5/11

For further information concerning this matter, please call:

CHRIS ELIAS at 916,921-5194
(Name of Person) Area Code & Daytime Telephone Number

COURIER ADDRESS:
Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 23, 1998

CHRIS C. ELIAS
ARRILIFE INTERNATIONAL
1333 HOWE AVE., SUITE 100
SACRAMENTO, CA 95825

SUBJECT: LIFELINE AFRICA FOUNDATION
Ref. Number: W98000006383

We have received your document for LIFELINE AFRICA FOUNDATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix 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.

You have made reference to a D/B/A in section number 1 of the application. If the corporation wishes to do business in Florida under another name, the attached "Fictitious Name Application" will need to be completed.

A certificate of existence, 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.

If you have any questions concerning the filing of your document, please call (850) 487-6093.

Freta Lott
Corporate Specialist Supervisor

Letter Number: 398A00015431

**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. LIFELINE AFRICA FOUNDATION, 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.)

2. CALIFORNIA. 3. 68-0357089
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. SEPTEMBER 1, 1995 5. UNTIL DISSOLVED
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NOT YET.
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)

7. 1333 HOWE AVE, SUITE 100
SACRAMENTO, CA 95825
(Current mailing address)

8. PROVIDING HUMANITARIAN ASSISTANCE THAT FOCUS ON CHILDREN THROUGH NUTRITION, MEDICINE AND EDUCATION TO FAMILIES IN AFRICA
(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:

RUBY NADI (Name)
2491 NORTHWEST 56TH AVE, SUITE 8 (Office address)
LAUDER HILL, Florida, FL 33313
(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.

Ruby Nadi
(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. Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: MR. Gordon OFFER.

Address: 4018 18TH ST N.E.

WASHINGTON, DC 20011

Vice Chairman: _____

Address: _____

Director: DR. MAURICE Iwu

Address: 21 CORRAL SPRINGS CR

SILVER SPRING, MD 20703

Director: CHARLES TIMOTHY

Address: 8434 CASABLANCA DR.

SACRAMENTO, CA 95828

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: CHRIS ELIAS

Address: 1333 HOWE AVE, SUITE 100

SACRAMENTO, CA 95825

Vice President: _____

Address: _____

Secretary: KECHE OGBOLE

Address: 10405 FORESTGROVE LN, MITCHELLVILLE, MD 20721

Treasurer: ERIC WADDELL

Address: 1333 HOWE AVE, SUITE 100, SACRAMENTO, CA 95825

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

CHRIS ELIAS, PRESIDENT & CHIEF EXECUTIVE OFFICER
(Typed or printed name and capacity of person signing application)

FILED
98 MAY 11 PM 3:38
TALLAHASSEE, FLORIDA

State of California

SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, **BILL JONES**, Secretary of State of the State of California, hereby certify:

That on the 30th day of August, 19 95,

LIFELINE AFRICA FOUNDATION

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

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

April 17, 1998



Bill Jones

Secretary of State