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TRANSMITTAL LETTER

TO: Qualification/Registration Section
Division of Corporations

SUBJECT: FAMILY PRESERVATION SERVICES OF SC, INC.
(Name of Corporation)

700003059207--8

-12/02/99--01075--007

*****87.50 *****87.50

Dear Sir or Madam:

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 conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

ROSE M. LOPEZ

(Name of Person)

FAMILY PRESERVATION SERVICES OF SC, INC.

(Firm/Company)

928 WOODROW STREET

(Address)

COLUMBIA SC 29205

(City, State and Zip Code)

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DIVISION OF CORPORATIONS
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For further information concerning this matter, please call:

ROSE M. LOPEZ

(Name of Person)

at (803) 252 - 5545

Area Code & Daytime Telephone Number

STREET 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

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$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. FAMILY PRESERVATION SERVICES OF S.C. 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. South Carolina 3. 58-2323717
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 20, 1997 5. PERPETUAL
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 12-1-99
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)

7. 928 Woodrow Street
Columbia SC 29205
(Current mailing address)

8. SEE ATTACHED
(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:

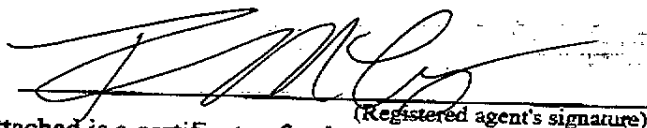
ROSE M. LOPEZ
(Name)

500 South US #1 STE. 106
(Office address)

Ft. PIERCE, Florida, 34950
(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.


(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

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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: MARIANNE LEONARD Barthel

Address: 4208 VERNER Street

Columbia SC 29204

Vice Chairman: _____

Address: _____

Director: William HOLLINGSWORTH

Address: 418 Hampton TRACE

Columbia SC 29209

Director: KATRINA DOWNS

Address: 4108 LANTANA DRIVE

Columbia SC 29205

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

President: ROSE M. LOPEZ

Address: 4701 FERNWOOD Road

Columbia SC 29206

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 

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

ROSE M. LOPEZ

EXECUTIVE DIRECTOR FPS OF SC, INC

(Typed or printed name and capacity of person signing application)

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Family Preservation Services of SC. Inc.

Purpose:

The purposes for which the corporation is organized are exclusively religious, charitable, scientific, literary, and educational within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue law.

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The State of South Carolina



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Office of Secretary of State Jim Miles **Certificate of Existence, Non-Profit Corporation**

I, Jim Miles, Secretary of State of South Carolina Hereby certify that:

FAMILY PRESERVATION SERVICES OF S.C., INC., A Non-Profit Corporation duly organized under the laws of the State of South Carolina on June 20th, 1997, has as of the date hereof filed as a non-profit corporation for religious, educational, social, fraternal, charitable or other eleemosynary purpose, and has filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-31-1404 of the South Carolina code and that the non-profit corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of
the State of South Carolina this 1st day of
December, 1999.

A handwritten signature in cursive script that reads "Jim Miles".

Jim Miles, Secretary of State