

11/4000002812

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

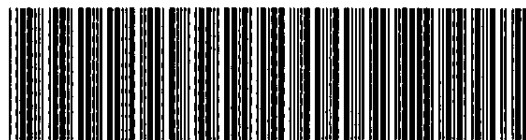
(Document Number)

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Certificates of Status

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14 MAR 14 AM 8:50

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

3-25-14

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** The Naked Foundation

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:

Jason Gudaitis, CPA

Name of Person

Pinchasik Yelen Muskat Stein

Firm/Company

3225 Aviation Ave Suite 500

Address

Miami, FL 33133

City/State and Zip Code

jmg318@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jud Ireland

Name of Person

at ( 516 ) 279-7745

Area Code & Daytime Telephone Number

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 5, 2014

JASON GAUDAITIS, CPA  
PINCHASKI YELEN MUSKAT STEIN  
3225 AVIATION AVENUE, SUITE 500  
MIAMI, FL 33133

SUBJECT: THE NAKED FOUNDATION  
Ref. Number: W14000014247

RECEIVED  
14 MAR 17 AM 11:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for THE NAKED FOUNDATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word 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.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 614A00004800

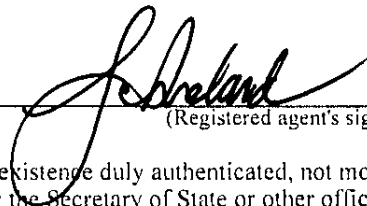
**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA**

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. The Naked Foundation a ~~Nonprofit Corporation~~ 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. 26-0684537  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 8/3/2007 5. Perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. n/a  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 50 S. Pointe Dr. Suite 1401 Miami Beach, FL 33139  
(Principal office address)  
  
50 S. Pointe Dr. Suite 1401 Miami Beach, FL 33139  
(Current mailing address)
8. To raise, allocate and distribute funds to worthy charitable causes. Bringing people together through art, science, education and the environment.  
(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: Jud Ireland  
  
Office Address: 50 S. Pointe Dr. Suite 1401  
  
Miami Beach, Florida 33139  
(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 official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

14 MAR 14 14 08:50

RECEIVED  
DIVISION OF CORPORATIONS  
MAR 14 2014

12. Names and addresses of officers and/or directors

**A. DIRECTORS**

Chairman: Jud Ireland

Address: 50 S. Pointe Dr. Suite 1401

Miami Beach, FL 33139

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Jud Ireland

Address: 50 S. Pointe Dr. Suite 1401

Miami Beach, FL 33139

Treasurer  
2/ Vice President: Teah Strozer

Address: 340 Page Street #202

San Francisco, CA 94102

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary  
Hector Garcia Rojas

Address: 12055 Pine Needle Lane Miami, FL 33156

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)

14. Jud Ireland

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

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

ENTITY NAME:

THE NAKED FOUNDATION

FILE NUMBER: C2949580  
FORMATION DATE: 08/03/2007  
TYPE: DOMESTIC NONPROFIT CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, 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 February 03, 2014.

*Debra Bowen*

DEBRA BOWEN  
Secretary of State

RMG