

N21000007223

(Requestor's Name)

(Address)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

WJ-83904



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 9, 2021

FLORIDA CAPITAL COURIER SERVICES

SUBJECT: ANNIE'S FAITH FOUNDATION INC.
Ref. Number: W21000083906

We have received your document for ANNIE'S FAITH FOUNDATION INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please return 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.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 121A00012668

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 10, 2021

FLORIDA CAPITAL COURIER SERVICES

SUBJECT: ANNIE'S FAITH FOUNDATION INC.
Ref. Number: W21000083906

FILED
2021 JUN 14 PM 11:26
TALLAHASSEE, FLORIDA

We have received your document for ANNIE'S FAITH FOUNDATION INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return 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.

Matthew T Moon
Regulatory Specialist II Supervisor

Letter Number: 721A00012915

RECEIVED
2021 JUN 14 PM 4:06
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

(OFFICE USE ONLY)

Corporation Name & Document Number, (if known):

1. Annie's Faith Foundation Inc.
(Business Name) Document #

Walk in Pick up time
 Mail out Will wait
 Photocopy

Certified Copy (please stamp each page)

Certificate of Status

NEW FILINGS

Profit
 Not for Profit
 Limited Liability
 Domestication
 Other
 CORP

AMMENDMENTS

Amendment
 Resignation of R.A. Officer/Director
 Change of Registered Agent
 Dissolution/Withdrawal
 Merger
 Conversion

OTHER FILINGS

Annual Report
 Fictitious Name
 APOSTIL () _____
Country

REGISTRATION/QUALIFICATIONS

Foreign filing
 Limited Partnership
 Reinstatement
 Trademark
 Other

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TALLAHASSEE, FL 32309
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EXAMINER'S INITIALS: _____

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
2021 JUN 14 PM 11:26
TALLAHASSEE, FLORIDA

SUBJECT: Annie's Faith Foundation Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: Carolyn Sierk-Hasan
Name (Printed or typed)

11490 Okeechobee Blvd, Suite 5
Address

Royal Palm Beach, FL 33411
City, State & Zip

561-791-0615
Daytime Telephone number

carolyn@sierkepa.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Annie's Faith Foundation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
11490 Okeechobee Blvd, Suite 5

Mailing address, if different is:

Royal Palm Beach, FL 33411

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Worldwide animal rescue & protection services.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

As provided for in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marlo Needham, President
Address: 11490 Okeechobee Blvd, Suite 5
Royal Palm Beach, FL 33411

Name and Title: Rose Mendoza, Director of Social Medi
Address: 11490 Okeechobee Blvd, Suite 5
Royal Palm Beach, FL 33411

Name and Title: Carolyn Sierk-Hacm, Treasurer
Address: 11490 Okeechobee Blvd, Suite 5
11490 Okeechobee Blvd, Suite 5

Name and Title: Melinda LaForce
Address: 11490 Okeechobee Blvd, Suite 5
Royal Palm Beach, FL 33411

Name and Title: Gina Potter, Director
Address: 11490 Okeechobee Blvd, Suite 5
Royal Palm Beach, FL 33411

Name and Title: _____
Address: _____

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Marlo Needham

Address: 11490 Okeechobee Blvd, Suite 5
Royal Palm Beach, FL 33411

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Marlo Needham

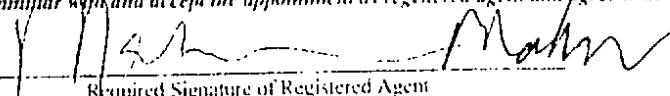
Address: 11490 Okeechobee Blvd, Suite 5
Royal Palm Beach, FL 33411

ARTICLE VIII EFFECTIVE DATE:

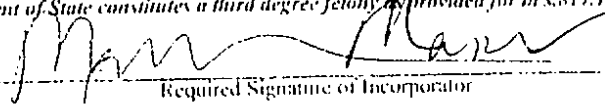
Effective date, if other than the date of filing: 6/8/21 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

 6/8/21
Required Signature of Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 6/8/21
Required Signature of Incorporator Date