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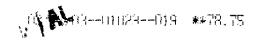
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TALLAHASSEE, FLORIDA

## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 27, 2003

ELIZABETH SHUEY 538 PIEDMONT RD. SANIBEL ISLAND, FL 33957

SUBJECT: OAHSPE FOUNDATION Ref. Number: W03000008772

We have received your document for OAHSPE FOUNDATION 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 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.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 903A00018677



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GLOW TARY OF STATE
TALLAHASSEE, FLORIDA

April 15, 2003

ELIZABETH SHUEY 538 PIEDMONT RD. SANIBEL ISLAND, FL 33957

SUBJECT: OAHSPE FOUNDATION Ref. Number: W03000008772

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

You failed to make the correction(s) requested in our previous letter.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 803A00022565

# TRANSMITTAL LETTER

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TO:	Registration Section		Elin	1122000
	Division of Corporations		iALLΔ	igate ST,
SUBJ	SECT: Oakspe (Name o	Foundation - must include	$\mathcal W$ .	LIARY OF ST. MASSEE, FLOR
Dear S	Sir or Madam:	-		
Affair not for	s in Florida", "Certificate of Exi r profit corporation to conduct it	stence", and check are sub s affairs in Florida.	n for Authorization to Conduct is emitted to register the above refe	
	return all correspondence conce	<b>*</b>	Howing:	
9	liasett SA	4 9 21 -		
	TI CONTRACTOR OF THE PROPERTY	(Name of Person)		_
_	•	<del></del>	•	
-92	WINE ARTS	· <del></del> -	<del></del> -	
10	100000 / (1013	(Firm/Company)		<u> </u>
		(Finit/Company)		
5.	38 Piedmont	RO.	· · · · · · · · · · · · · · · · · · ·	
		(Address)		_

For further information concerning this matter, please call:

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

Enclosed is a check for the following amount:

**⊅** \$70.00 Filing Fee **□** \$78.75 Filing Fee & Certificate of Status **MAILING ADDRESS:** 

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

□ \$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 CONDUCTIFS AFFAIRS IN THE STATE OF FLORIDA:							
THE STATE OF FLORIDA:							
1. OAHSPE FOUNDATION INC LALLAHASSE STATE							
1. OAHSPE FOUNDATION TUC IALLAHASSE STATE (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like Hipport 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.)							
ARCC DAY							
2. (State or country under the law of which it is incorporated) (FEI number, if applicable)							
4. SEPT. 1973 5 PERPETILAL							
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")							
6. UPON QUALIFICATION (Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)							
7. P.O.B. 446 - ASHLANO DREGON 97550 (Principal office address)							
538 PLEOMONERD, SANIBEL, FL 33957							
538 PLEOMONTRD, SANIBEL, FL 33957 (Current mailing address)							
8. PROMOTE HEALTHY WEESTYLES (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)							
(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 or Mail Drop Box NOT acceptable)							
Name: ElizaBETH SHUEY							
/ _							
Office Address: 538 PIEDMONT RD.							
Shafipe, 35053							
SANIBEL Florida 33 957 (City) (Zip Code)							
(Old)							
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.							

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:

×

A. DIRECTORS			FIL	.ED
Chairman:		· <u></u>	03 APR 21	-AM 0
Address:			STURE I AND	TIE STATE
		<u> </u>	TALLAHASSE	E FLORIDA
Vice Chairman:	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Address:		As as a support		_
				<u>-</u>
Director:		- 58 - 5		::
Address:	1 <u></u>	· <del>*</del>		4
	<u> </u>			
Director:	- <del>-</del>	<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·	_
Address:		<u> </u>	<del></del>	_
				_
B. OFFICERS	 -			
President: ElizaBETH Strey				
Address: 538 PIEDMONT, 5AM	SIBEL, FE	_ 339,	<u>5</u>	_
OREGON - P.O.B. 446,		08	77520	<u> </u>
Vice President: ANNE APROBERT	3		·	
Address: 538 PIEDMONT, SAM	SIBEL, F	<u> 339</u>	57	_
				_
Secretary: NANCY KEBER		<u> </u>	/u	<del>-</del>
Address: 1450 Tyler Creek Re	Da. ASHI	ANO,	OR 975	20
Treasurer:/	***	-1-1007		
Address:			, , , , , , , , , , , , , , , , , , ,	
NOTE: TO the state of the state		. ~~	u e .	
NOTE: If necessary, you may attach an addendum to the app	ication listing addition	nai officers and	or directors.	
13. (Sign) ture of Chairman, Vice Chairman, or any	officer listed in number	er 12 of the app	lication)	•
14. ELIZABETH SHUEY (Typed or printed name and capaci	DRES (DEA	onlication)		

# State of Oreganian of State of the Secretary of State Corporation Division

I, BILL BRADBURY, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

### THE OAHSPE FOUNDATION

was

incorporated

under the Oregon

Nonprofit Corporation Act

on

July 24, 1972

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

BILL BRADBURY, Secretary of State

March 18, 2003

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