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2016 FEB - 8 PM 4: 29
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TALLAHASSEE, FLORIDA

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K. SALY
EXAMINER
FEB 10

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Generations Family Services Inc.
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:

ANDRIZE M PATRICK
Name of Person

Generations Family Service Inc
Firm/Company

410 N Boylan Ave
Address

Raleigh NC 27603
City/State and Zip Code

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

For further information concerning this matter, please call:

Andrize Patrick at (919) 745 0538
Name of Person Area Code Daytime Telephone Number

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

STREET/COURIER ADDRESS:
Registration 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

February 9, 2016

To Whom It May Concern:

Please be advised that I incorporated Generations Family Services in the State of Florida in December but since then has dissolved it, and applied for foreign organization operation in the state of Florida and give my full consent to operate as such.

Sincerely,

Clifford Patrick

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2016 FEB -8 PM 4:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. Generations Family Services 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.)

N/A

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. North Carolina 3. 47-5645509 (EIN)
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/23/15 5. N/A
(Date of Incorporation) (Date of duration, if other than 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. 401 N Boylan Ave, Raleigh NC 27603
(Principal office address)

N/A
(Current mailing address, if different)

8. Business expansion and desires to serve FL clients
(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: Clifford Patrick

Office Address: 2923 NE 15th Str, Gainesville FL 32609
Gainesville, Florida 32609
(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.

Handwritten signature of Clifford Patrick

(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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: _____
Address: _____

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

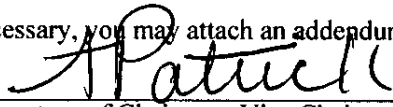
President: ANDRIZE M PATRICK
Address: 24 Landlocked Cir.
Angier NC 27501

Vice President: N/A
Address: _____

Secretary: Clifford T. PATRICK
Address: 2923 NE 15th Str, Gainesville FL 32609

Treasurer: Tracy T. Patrick
Address: 24 Landlocked Cir, Angier NC 27501

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. ANDRIZE M PATRICK - CEO
(Typed or printed name and capacity of person signing application)

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2016 FEB -8 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

GENERATIONS FAMILY SERVICES INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 23rd day of November, 2015 , with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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2016 FEB - 8 PM 4: 30
SECRETARY OF STATE
FALL HASSEL, F. GRIFIN



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 29th day of January, 2016.

Elaine F. Marshall

Secretary of State