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	COV	EŘ LETŤ	ER 3		
TO: Reg	gistration Section		:	<u>5.</u> }	
	vision of Corporations				
eun ie ea	Unity in Disasters , Inc				
SUBJECT	Name of Corp	oration - mus	st include suffix	•	
Dear Sir or	Madam:				
Affairs in F	ed "Application by Foreign Not for florida", "Certificate of Existence", above referenced not for profit corp	or "Certificate	e of Status" and cl	heck are submitted to	
Please retur	rn all correspondence concerning th	is matter to th	e following:		
	Joe Gilliom			-1	
	Na	ame of Person		- SEL	
	Unity in Disasters , Inc			消毒	-11
	- 	irm/Company	<u> </u>		-
		• •		7 0 7 0	m
					
	13908 Collier Rock Place			GRETARY OF STATE	
		Address			
	Riverview, Florida 33579				
	City/S	tate and Zip C	Code		
	joegilliom@yahoo.com				
		1.0		 	
	E-mail address: (to be used	d for future an	nual report notific	cation)	
For further	information concerning this matter,	, please call:			
Joe Gilliom		770	5727124		
	Name of Person	at (Area Co	de Daytime To	elephone Number	
Ma	iling Address:	Stre	eet Address:		
-	gistration Section		gistration Section		
Division of Corporations			vision of Corpor		
		e Centre of Talla			
1 21	llahassee, FL 32314		15 N. Monroe St llahassee, FL 32		
	a check for the following amount:	TMENT OF C	2T A TH.		
Please make	check payable to: FLORIDA DEPAR Filing Fee S78.75 Filing Fee 8		STATE 75 Filing Fee &	■\$87.50 Filing Fee	•
_ φ/0.00 I	Certificate of Star		rtified Copy	Certificate of St 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:

Unity in Disa	isters, Inc				
import in langu	iage as will clearly indic	ate that it is a cornoration	on instead of a r	ORATION" or words on the partner of	rship if not so contained
(If name unav	ailable in Florida, enter	alternate corporate nam	ne adopted for th	ne purpose of transacting	g business in Florida)
2. Georgia		2	08063809		
(State or cou	untry under the law of w	hich it is incorporated)	08063809	(FEI number, if applica	able)
				•	
(1	Date of Incorporation)	<i>`</i>	(Da	ite of duration, if other t	han perpetual)
6. none					
(Date first cond	lucted affairs in Florida i	f prior to registration. See	sections 617.15	01 & 617,1502, F.S. to a	determine pend liability.)
7 13908 Collier	Rock Place , Riverview	Florida 33579			
·		(Principal off	ice street addre	ss)	
					器して
same		(Current mailing	address if diff	erent)	NSSE TO THE PROPERTY OF THE PR
		(Carrent maning	address, ii diii	cremy	SEE 3
Disactor Polis	of - Community Outrose	s.			
8. (Purpose(s) of	composition authorized	in home state or country	to be carried or	ut in the state of Florida	<u> </u>
(- arpone(n) er	co.pordion damonizad	nome base or country	, to be curried of	or in the mare or i fortun	,
9. Name and str	reet address of Florida	registered agent: (P.0	O. Box <u>NOT</u> a	cceptable)	
	L CIII				
Name:	Joe Gilliom		***	<u> </u>	
Office Address:	13908 Collier Rock Pl	ace			
	Riverview		, Florida <u></u>	3579	
	(Cit	y)		(Zip Code)	_
10 Desistance	l agentic acceptance				
Having been no	l agent's acceptance: amed as registered ag	ent and to accept ser	vice of process	s for the above stated	corporation at the place
designated in th	his application, I here	by accept the appoin	tment as regis	tered agent and agree	e to act in this capacity. I e performance of my duties,
and I am famili	iar with and accept th	visions of an statutes we obligations of my p	veiduve to the position as regi	s proper and complete istered agent.	: perjormance of my auties,
		1	$A \cdot A \cdot$		
		1001	YI. 111.	40. 4	
			Jycon	7//	
		(registered	agent's signatur	e)	
11. Attached is	a certificate of existe	nce duly authenticated	d, not more tha	ın 90 days prior to del	livery of this application to
	nent of State, by the Stunder the law of which		ther official ha	ving custody of corpo	orate records in the
,		· · · · · · · · · · · · · · · · · · ·			

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOR			A milima dia Massiliana	
□Chairman	Shamika Deck Name:	□Chairman	Name:	
□Vice Chairman	Address: 3100 Sweetwater Rd # 212	□Vice Chairman	Address: 17066 Irongate Rail	
□Director	Lawrenceville, Georgia 30044	□Director	San Antonio, Tx 78247	
□President		□President		
□Vice President		□Vice President		
□Secretary	Treasurer	■ Secretary	□Treasurer	
□Other:	Other:	□Other:	□Other:	
□Chairman	Name:	□Chairman		
□ Vice Chairman	13908 Collier Rock Place	□Vice Chairman	Address:	
□Director	Riverview, Florida 33579	□Director	- 20 -	
President		□President	- SS - P	
□Vice President		☐ Vice President	STATE STATE	
☐ Secretary	□Treasurer	□Secretary	☐Treasurer	
Other:	☐ Other:	□Other:	Other:	
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	<u></u>	□Director		
□President		□President		
□Vice President		□Vice President		
☐ Secretary	☐Treasurer	Secretary	□Treasurer	
□Other:	Other:	□Other:	Other:	
NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Joe Gilliom - President / Founder (Typed or printed name and capacity of person signing application)				

Control Number: 08063809

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

UNITY IN DISASTERS, INC.

a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, contificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 19886508 Date Inc/Auth/Filed: 08/07/2008 Jurisdiction : Georgia Print Date : 01/02/2021

Form Number : 211



Brad Raffensperger

Brad Raffensperger