## F25000000 778

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
W25000000416				

Office Use Only



600440389606

12/03/24--01040--005 \*\*78.75

RECEIVED
DEC 0 2 2024

SECHLARY OF STATEME



January 2, 2025

MARIE ATAKE 5229 GROVE MILL LOOP PMB-529 LAKEWOOD RANCH, FL 34211 US

SUBJECT: FORTE ANIMAL RESDUE, INC.

Ref. Number: W2500000410

We have received your document for FORTE ANIMAL RESDUE, 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 be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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.

Emani D Manning Regulatory Specialist II

Hello,

Letter Number: 725A00000101

As highlighted in yellow, it was correctly signed.
Please advise.

RECEIVED

FEB 0 4 2025

## 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. Forte Animal (Name of corpo	ration: must include the word "INCORPORATED	" or "CORPORATION" or words or abbrevi	ations of like
împort in langua in the name at p	age as will clearly indicate that it is a corporation i resent. "Company" or "Co." may not be used as a	nstead of a natural person or partnership if ne corporate suffix by a nonprofit corporation.)	ot so contained
(If name unava	silable in Florida, enter alternate corporate name a	dopted for the purpose of transacting busines	s in Florida)
CA		D 02 47520	
2. (State of cour	ntry under the law of which it is incorporated)	3-0348522 (FEI number, if applicable)	
		, , , , ,	
4. 1.29.2003	Date of Incorporation) 5.	(D) ( () () () ()	
(L	Pate of Incorporation)	(Date of duration, if other than perp	etual)
6. <sup>n/a</sup>			
(Date first cond	ucted affairs in Florida if prior to registration. See sec	ctions 617.1501 & 617.1502, F.S. to determine	penalty liability.)
7. 13157 Mindan	nao Way, #1500, Marina del Rey, CA 90292		
	(Principal office	street address)	
5220 C M	Old and I should be about 17, 24011 Heland Santa		
3229 Glove M	ill Loop Lakewood Ranch FL 34211 United States (Current mailing ad		<del></del>
	(Current maning ad	diess, it different)	
_			
8. Dog rescue			N H
(Purpose(s) of	corporation authorized in home state or country to	be carried out in the state of Florida)	SEC:
9. Name and str	eet address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	FEB -
			5 SKE
Name:	Marie Atake		로 캠프
Office Address:	5229 Grove Mill Loop		OF STATE HE PH 3: 18
	Lakewood Ranch	Florida 34211 (Zin Code)	- CH.
	(City)	(Zip Code)	" · · · · · · · · · · · · · · · · · · ·
	, •		
10. Registered	agent's acceptance:		
Having been na desionated in th	imed as registered agent and to accept servic is application, I hereby accept the appointm	e of process for the above stated corpore ont as registered agent and agree to act	ition at the place in this canacity. I
further agree to	comply with the provisions of all statutes re	lative to the proper and complete perfor	
una i um jumili	ar with and accept the obligations of my pos	uton as registerea agent.	
	1 : A		
	× listu _		
		ent'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.

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

A. DIRECTOR					
□ Chairman	Marie Atake Name:	□ Chairman	Name: Dorit Hahn 1608 Stanford Avenue		
□Vice Chairman	Address: 14621 State Road 70 E, #529	□Vice Chairman	Address:		
Director	Lakewood Ranch, FL 34202	■Director	Redondo Beach, CA 90278		
President		□President			
□Vice President		□Vice President			
☐ Secretary	Treasurer	□ Secretary	□Treasurer		
Other:	☐ Other:	□Other:	Other:		
□Chairman □Vice Chairman □Director	Name: Andy Pearlman  12530 Braddock Dr., #132-A  Address: Los Angeles, CA 90066	□Chairman □Vice Chairman ⊞Director	Name: Armaiti May, DVM  23823 Malibu Road, Ste. 50-390  Address: Malibu, CA 90265		
□President		□President			
□Vice President		□Vice President			
Secretary	Treasurer	☐ Secretary	□Treasurer		
Other:	Other:	□Other:	Other:		
□ Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
President		□President			
□Vice President	<del></del>	□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.  13. x  (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)  Maric Atake, Founder & CEO  (Typed or printed name and capacity of person signing application)					



I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

**Entity Name:** FORTE ANIMAL RESCUE

Entity No.: 2495684 Registration Date: 01/29/2003

Entity Type: Nonprofit Corporation - CA - Public Benefit

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, 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 November 06, 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 263524625

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.