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(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

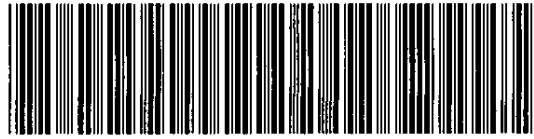
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*W09-38991*

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08/28/09--01001--001 \*\*710.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 SEP - 8 P 2: 22

FILED



DUKE UNIVERSITY

OFFICE OF COUNSEL  
310 BLACKWELL STREET, 4TH FLOOR  
BOX 104124  
DURHAM, NORTH CAROLINA 27710  
(919) 684-3955  
(919) 684-8725 FAX



DUKE UNIVERSITY  
HEALTH SYSTEM

August 18, 2009

Florida Department of State  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Duke University

To Whom It May Concern:

Thank you for waiving one-half of the late registration fee. Enclosed is Duke University's check for the following:

\$ 87.50	Filing Fee, Certificate of Status, Certified Copy
61.25	2008 Annual report fee
61.25	2009 Annual report fee
<u>500.00</u>	½ late registration penalty
\$710.00	

Also enclosed, you will find Duke University's "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida" and its "Certificate of Existence". Please cause this application to be filed and return the Certificate of Status and Certified Copy to my attention.

Sincerely,

David G. Singleton  
Associate Counsel

DGS/ljb  
Enclosures

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**



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DUKE UNIVERSITY  
HEALTH SYSTEM

September 3, 2009

Diane Cushing  
Florida Department of State  
Division of Corporations  
PO Box 6327 Tallahassee, Florida 32314

RE: Application by Foreign Not For Profit Corporation for  
Authorization to Conduct its Affairs in Florida

Dear Ms. Cushing:

Enclosed please find the Application by Foreign Not For Profit Corporation for Authorization to Conduct its Affairs in Florida form which I am returning to you at your direction.

Thank you for agreeing to accept this for filing as submitted.

Sincerely,

David G. Singleton  
Duke University  
Office of Counsel

DGS/dld

Enclosure

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Duke University  
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", 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:

David G. Singleton  
Name of Person

Duke University  
Firm/Company

Office of Counsel

Box 104124  
Address

Durham, NC 27710  
City/State and Zip Code

singleton.david@duke.edu  
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

For further information concerning this matter, please call:

David Singleton at ( 919 ) 684-3955  
Name of Person Area Code & Daytime Telephone Number

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

**STREET/COURIER ADDRESS:**  
New Filing 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 28, 2009

DAVID G. SINGLETON  
DUKE UNIVERSITY  
BOX 104124 - OFFICE OF COUNSEL  
DURHAM, NC 27710

SUBJECT: DUKE UNIVERSITY  
Ref. Number: W09000038991

We have received your document for DUKE UNIVERSITY and your check(s) totaling \$710.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word 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.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole  
Regulatory Specialist II

Letter Number: 909A00029061

**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. Duke University  
(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.)
2. North Carolina 3. 56-0532129  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 12, 1841 5. Perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. June 2008  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. Office of Counsel, 310 Blackwell Street, 4th Floor, Durham NC 27701  
(Principal office address)
- Office of Counsel, Box 104124, Durham NC 27710  
(Current mailing address)

8. See Attachment A  
(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: Jim Turner


Office Address: 200 South Orange Avenue

Sarasota, Florida 34236  
(City) (Zip Code)

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TALLAHASSEE, FLORIDA  
**FILED**

**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.*

  
(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.

12. Names and addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**B. OFFICERS**

President: SEE ATTACHMENT B

Address: \_\_\_\_\_

\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_


\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**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. Peter Lange, Provost, Duke University  
(Typed or printed name and capacity of person signing application)

**FILED**  
2009 SEP -8 P 2: 22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## **ATTACHMENT A**

At this time Duke University will operate its Talent Identification Program ("TIP") in Florida. TIP is dedicated to being the national leader in identifying academically talents students and providing innovative programs to support the development of their optimal educational potential. Programs for students, families, and educators strive to be of such excellent that they will become models for the education of academically talented students worldwide.



ATTACHMENT B

Officers:

Dr. Richard Brodhead Duke University Box 90001 Durham, NC 27708-0001	President
Dr. Peter Lange Duke University Box 90005 Durham, NC 27708-0005	Provost
Dr. Tallman Trask, III Duke University Box 90027 Durham, NC 27708-0027	Executive Vice President
Dr. Victor Dzau Duke University Box 3701 Med Ctr Durham, NC 27710	Chancellor for Health Affairs and Dean of Medical School
Ms. Pamela Bernard Duke University Box 104124 Durham, NC 27710	Vice President, General Counsel
Mr. B. Hofler Milam Duke University Box 104133 Durham, NC 27701	Vice President, Finance and Treasurer
Dr. Richard Riddell Duke University Box 90030 Durham, NC 27708-0001	Vice President, Secretary



# 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

### DUKE UNIVERSITY

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 12th day of January, 1841 , 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.

**FILED**  
2009 SEP -8 P 2:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 12th day of August, 2009.

*Elaine F. Marshall*

Secretary of State

