

Division of Corporations

F13000003102

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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Fax Number : (850)878-5368

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION Attn: Valerie
AFFILIATED WORKERS ASSOCIATION INC

Certificate of Status	0
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE FL 32310

7/22
8



July 19, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: AFFILIATED WORKERS ASSOCIATION INC
REF: W13000040713

RE-SUBMIT
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date of submission 7/18

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, and Inc.

If you have any further questions concerning your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

FAX Aud. #: H13000160790
Letter Number: 013A00017559

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DIVISION OF CORPORATIONS
JUL 19 PM 9:59

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. Affiliated Workers Association 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.)
2. Arizona 3. 43-1942346
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. 6/20/2013 5. perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 101 E. Park Blvd. Suite 600, Plano TX 75054
(Principal office address)
- 101 E. Park Boulevard, Suite 600, Plano, TX 75074
(Current mailing address)

8. Educational.
(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: CT Corporation System


Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip Code)

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 NEW
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

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.

CT Corporation System

By: Michael Jones, Asst Secy 
(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: see attached _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

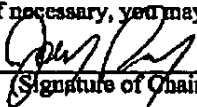
Address: _____

Treasurer: _____

Address: _____

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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. Joey Ray, Secretary _____
(Typed or printed name and capacity of person signing application)

**AFFILIATED WORKERS ASSOCIATION
OFFICERS AND DIRECTORS**

Officers	Principal Business Address
Neil Peterson, President	101 E. Park Blvd., Ste. 600 Plano TX 75074
Matt Krzyslak, Vice President	101 E. Park Blvd., Ste. 600 Plano TX 75074
Jeff Burley, Treasurer	101 E. Park Blvd., Ste. 600 Plano TX 75074
Joey Ray, Secretary	101 E. Park Blvd., Ste. 600 Plano TX 75074

Directors	Principal Business Address
Neil Peterson	101 E. Park Blvd., Ste. 600 Plano TX 75074
Matt Krzyslak	101 E. Park Blvd., Ste. 600 Plano TX 75074
Jeff Burley	101 E. Park Blvd., Ste. 600 Plano TX 75074
Joey Ray	101 E. Park Blvd., Ste. 600 Plano TX 75074

13 JUL 18 PM 9:50
FROM
SECRETARY OF STATE
DIVISION OF CORPORATIONS

STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

13 JUL 18 PM 9:50
SECRETARY OF STATE
DIVISION OF CORPORATIONS

To all to whom these presents shall come, greeting:

I, Jodi A. Jerich, Executive Director of the Arizona Corporation Commission, do hereby certify that

*****AFFILIATED WORKERS ASSOCIATION*****

a domestic nonprofit corporation organized under the laws of the State of Arizona, did incorporate on June 20, 2013.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said corporation is not administratively dissolved for failure to comply with the provisions of the Arizona Nonprofit Corporation Act; and that its most recent Annual Report, subject to the provisions of A.R.S. sections 10-3122, 10-3123, 10-3125, & 10-11622, has been delivered to the Arizona Corporation Commission for filing; and that the said corporation has not filed Articles of Dissolution as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 3rd Day of July, 2013, A. D.



Jodi A. Jerich
Jodi A. Jerich, Executive Director

By: _____ 932748