

10/28/2020

Division of Corporations

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**FOREIGN PROFIT/NONPROFIT CORPORATION
AMERICAN NURSES' ASSOCIATION**

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November 5, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LEGALINC CORPORATE SERVICES INC.

SUBJECT: AMERICAN NURSES' ASSOCIATION
REF: W20000127638

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

The name that from DC should be on the first line without the suffix. The alternate name for Florida should be on the second line with the INC.,

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 (850) 245-6051.

Tracy L Lemieux
Regulatory Specialist II

FAX Aud. #: H20000375262
Letter Number: 020A00022159

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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. AMERICAN NURSES' ASSOCIATION

(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.)

American Nurses' Association, Inc.

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

2. District of Columbia 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05-03-1917 5. _____
(Date of Incorporation) (Date of duration, if other than 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. 8515 Georgia Avenue, Suite 400, Silver Spring, MD, US, 20910
(Principal office street address)

(Current mailing address, if different)

8. promote the professional and educational advancement of nurses.
(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: LEGALINC CORPORATE SERVICES INC.

Office Address: 5237 SUMMERLIN COMMONS BLVD, SUITE 400

FORT MYERS, Florida 33907
(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.

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

A. DIRECTORS

Chairman Name: Ernest Grant
 Vice Chairman Address: 8515 Georgia Avenue, Suite 400
 Director Silver Spring, MD, 20910
 President
 Vice President
 Secretary Treasurer
 Other: Other:

Chairman Name: Stephanie Pierce
 Vice Chairman Address: 8515 Georgia Avenue, Suite 400
 Director Silver Spring, MD, 20910
 President
 Vice President
 Secretary Treasurer
 Other: Other:

Chairman Name: Jennifer Mensik
 Vice Chairman Address: 8515 Georgia Avenue, Suite 400
 Director Silver Spring, MD, 20910
 President
 Vice President
 Secretary Treasurer
 Other: Other:

Chairman Name: Varsha Singh
 Vice Chairman Address: 8515 Georgia Avenue, Suite 400
 Director Silver Spring, MD, 20910
 President
 Vice President
 Secretary Treasurer
 Other: Other:

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Chairman Name: Jeff Watson
 Vice Chairman Address: 8515 Georgia Avenue, Suite 400
 Director Silver Spring, MD, 20910
 President
 Vice President
 Secretary Treasurer
 Other: Other:

Chairman Name: Jennifer Gil
 Vice Chairman Address: 8515 Georgia Avenue, Suite 400
 Director Silver Spring, MD, 20910
 President
 Vice President
 Secretary Treasurer
 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. Ernest Grant
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Ernest Grant, President
(Typed or printed name and capacity of person signing application)

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Attachment for
AMERICAN NURSES' ASSOCIATION

12A. Directors (continued):

Director: Marcus Henderson, 8515 Georgia Avenue , Suite 400 , Silver Spring, MD, US, 20910
Director: Tonisha J. Melvin, 8515 Georgia Avenue , Suite 400 , Silver Spring, MD, US, 20910

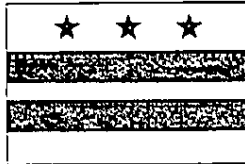
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Initial File #: 014586
Entity Type: Non-Profit Corporation

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
CORPORATIONS DIVISION



C E R T I F I C A T E

THIS IS TO CERTIFY that all applicable provisions of the District of Columbia Business Organizations Code (Title 29) have been complied with and accordingly, this **CERTIFICATE OF GOOD STANDING** is hereby issued to

AMERICAN NURSES' ASSOCIATION

WE FURTHER CERTIFY that the domestic entity is formed under the law of the District on 05/03/1917; that all fees, and penalties owed to the District for entity filings collected through the Mayor have been paid and Payment is reflected in the records of the Mayor. The entity's most recent biennial report required by § 29-102.11 has been delivered for filing to the Mayor; and the entity has not been dissolved. This office does not have any information about the entity's business practices and financial standing and this certificate shall not be construed as the entity's endorsement.

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IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of 10/28/2020 3:30 PM

Business and Professional Licensing Administration



Josef G. Gasimov

JOSEF G. GASIMOV
Superintendent of Corporations,
Corporations Division

Muriel Bowser
Mayor

Tracking #: VETYnhkw

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