

F21000006802

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

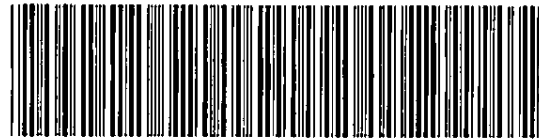
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF FLORIDA
TALLAHASSEE, FL

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RECEIVED

S. FRANKLIN

DEC - 1 2021

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 215263 7887852
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 87.50

ORDER DATE : November 9, 2021
ORDER TIME : 10:53 AM
ORDER NO. : 215263-005
CUSTOMER NO: 7887852

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TALLAHASSEE, FL

FOREIGN FILINGS

NAME: HUSSIAN COLLEGE, INC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- XX _____ CERTIFIED COPY
- _____ PLAIN STAMPED COPY
- XX _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hussian College, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Joshua Figuli

	Name of Person
Hussian College, Inc.	
	Firm/Company
1500 Spring Garden Street, Suite 101	
	Address
Philadelphia, PA 19130	
	City/State and Zip code
joshua.figuli@hussiancollege.edu	
E-mail address: (to be used for future annual report notification)	

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For further information concerning this matter, please call:

Joshua Figuli	at (720)	480-9456
Name of Person	Area Code	Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$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

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Hussian College, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. Pennsylvania 3. 231657763
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 7/1/1965 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1500 Spring Garden Street, Suite 101, Philadelphia, PA 19130
(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

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9. 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.

Eylima Baker
Assistant Vice President

(Registered agent's signature)

10. 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.

11. 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: Ricardo Phillips
 Vice Chairman Address: 1500 Spring Garden Street
 Director Philadelphia, PA 19130
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Paul Barrett
 Vice Chairman Address: 1500 Spring Garden Street
 Director Philadelphia, PA 19130
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Steve Steele
 Vice Chairman Address: 1500 Spring Garden Street
 Director Philadelphia, PA 19130
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

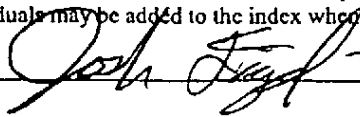
Chairman Name: Jacob Kaufman-Osborn
 Vice Chairman Address: 1500 Spring Garden Street
 Director Philadelphia, PA 19130
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: David Figuli
 Vice Chairman Address: 1500 Spring Garden Street
 Director Philadelphia, PA 19130
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Gene Wade
 Vice Chairman Address: 1500 Spring Garden Street
 Director Philadelphia, PA 19130
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

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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.

12.  Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Joshua Figuli, President
 (Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

11/29/2021

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Hussian College, Inc.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set
my hand and caused the Seal of the Secretary's
Office to be affixed, the day and year above written

Veronica W. Desrosiers

Acting Secretary of the Commonwealth

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FILED
PA. STATE DEPT.
HARRISBURG, PA.

Certification Number: TSC211129161999-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>