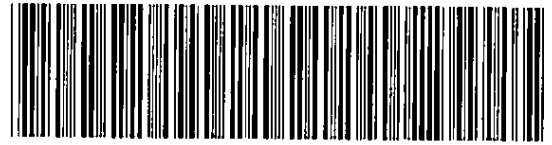


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(Requestor's Name)

(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:

Office Use Only

09/27/22--01002--009

19

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TAL...

2022 SEP 26 PM 4:33

T. LEMIEUX
SEP 27 2022

Advanced Incorporating Service

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2724
Email: wlopez@aisincfl.com
Website: www.aisincfl.com

<p style="text-align: center;">NAME OF ENTITY</p> <p><i>National Early Childhood Program Accreditation Commission, Inc.</i></p>	FOR OFFICE USE ONLY
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PICK ONE:

CERTIFIED COPY PHOTOCOPY C.U.S.

FILING:

CORPORATION LLC LIMITED PARTNERSHIP GENERAL PARTNERSHIP
 FICTITIOUS NAME SERVICEMARK/TRADEMARK AMENDMENT
 FOREIGN QUALIFICATION JUDGMENT LIEN
 OTHER _____

RETRIEVAL:

GOOD STANDING CERT/C.U.S. CERTIFIED COPY PHOTOCOPY
Of _____

APOSTILLE/NOTARY CERTIFICATION REQUEST:

Country _____

Amount of Documents _____

DATE 9/24/22 TIME _____

Notes: _____

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. NATIONAL EARLY CHILDHOOD PROGRAM ACCREDITATION COMMISSION, 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.)

(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. 03/04/1993 5. _____
 (Date of Incorporation) (Date of duration, if other than perpetual)

6. 09/26/2022
 (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 7010 Little River Turnpike, Suite 320, Annandale, Virginia 22003
 (Principal office street address)

(Current mailing address, if different)

8. For the purpose of accrediting early childhood programs and providing credentials for early care and education, professionals, managers and the public about the importance of such accreditation.

(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: Universal Registered Agents, Inc.

Office Address: 1317 California Street

Tallahassee

(City)


, Florida 32304

(Zip Code)

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 2022 SEP 26 AM 11:10
 TALLAHASSEE, FLORIDA

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

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: Barbara Palmer
 Vice Chairman Address: 1350 Blair Drive, Suite G
 Director Odenton, MD 21113
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Julie Pelletier
 Vice Chairman Address: 558 Elm Street
 Director Fair Bluff, NC 28439
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Storm Webb
 Vice Chairman Address: 8524 Richmond Ave
 Director Alexandria, VA 22309
 President _____
 Vice President _____
 Secretary Treasurer
 Other: Executive Director Other: _____

Chairman Name: Cynthia Lehnoff
 Vice Chairman Address: 132 Tuscany Chase Dr
 Director Daytona Beach, FL 32117
 President _____
 Vice President _____
 Secretary Treasurer
 Other: Board Member Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

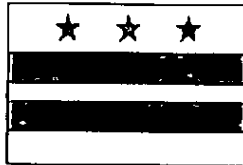
NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. Barbara Palmer
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Barbara Palmer
 (Typed or printed name and capacity of person signing application)

Initial File #: 930763
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

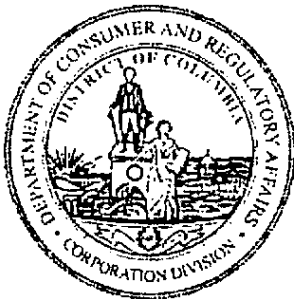
THIS IS TO CERTIFY that all applicable provisions of the District of Columbia Business Organizations Code (Title 29) have been complied with and accordingly, this **CERTIFICATE OF GOOD STANDING** is hereby issued to

NATIONAL EARLY CHILDHOOD PROGRAM ACCREDITATION COMMISSION, INC.
(THE)

WE FURTHER CERTIFY that the domestic entity is formed under the law of the District on 03/04/1993 ; 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.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of 9/26/2022 2:36 PM

Business and Professional Licensing Administration



Josef G. Gasimov

JOSEF G. GASIMOV
Superintendent of Corporations,
Corporations Division

Muriel Bowser
Mayor