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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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K. SALY

NOV 10 2022

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 11/8/2022

****WALK IN****

ENTITY NAME TOOLS OF THE MIND, INC.

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 70.00

ACCOUNT # I20160000072

Tina

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tools of the Mind, Inc.

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", or "Certificate of Status" 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:

John Hiestand

Name of Person

Harbor Compliance

Firm/Company

1830 Colonial Village Ln

Address

Lancaster, PA 17601

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Hiestand at (717) 431-9164

Name of Person Area Code Daytime Telephone Number

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

STREET/COURIER ADDRESS:
Registration 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

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. Tools of the Mind, 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. Colorado (State or country under the law of which it is incorporated) 3. (FEI number, if applicable)

4. 12/17/2018 (Date of Incorporation) 5. (Date of duration, if other than perpetual)

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

7. 219 CEDAR STREET, HOLLISTON, MA 01746 (Principal office address)

PO Box 829, Shirley, MA 01464 (Current mailing address, if different)

8. Helping children in early childhood education learn and develop to their full potential with theory-based principles. (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: Registered Agents Inc

Office Address: 7901 4th St N STE 300

St. Petersburg, Florida 33702 (City) (Zip Code)

2022 NOV -9 PM 12:52
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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.

Bill Havre (Handwritten signature)

Bill Havre - Assistant Secretary (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: Nathaniel Foote

Address: 219 CEDAR STREET, HOLLISTON, MA 01746

Vice Chairman: _____

Address: _____

Director: Ellen Galinsky

Address: 219 CEDAR STREET, HOLLISTON, MA 01746

Director: Elsa Holguin

Address: 219 CEDAR STREET, HOLLISTON, MA 01746

B. OFFICERS

President: Deborah Leong

Address: 219 CEDAR STREET, HOLLISTON, MA 01746

Vice President: _____

Address: _____

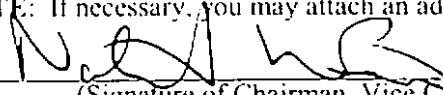
Secretary: BARBARA WILDER-SMITH

Address: 219 CEDAR STREET, HOLLISTON, MA 01746

Treasurer: CYNTHIA CADIGAN

Address: 219 CEDAR STREET, HOLLISTON, MA 01746

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. Nathaniel Foote, Board Chair
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
HOLLISTON, MASSACHUSETTS

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Tools of the Mind

is a

Nonprofit Corporation

formed or registered on 12/17/2018 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20188000491 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 11/03/2022 that have been posted, and by documents delivered to this office electronically through 11/07/2022 @ 06:18:59 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 11/07/2022 @ 06:18:59 in accordance with applicable law. This certificate is assigned Confirmation Number 14444860 .



Jena Griswold

Secretary of State of the State of Colorado

2022 NOV -9 PM 12: 52
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FILED

*****End of Certificate*****
Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, <http://www.coloradosos.gov/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, <http://www.coloradosos.gov> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."