

F23000000816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

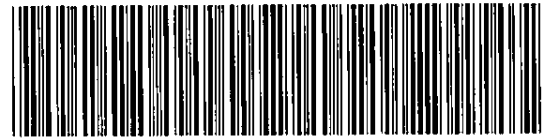
(Document Number)

Certified Copies _____ Certificates of Status _____

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APPROVED
AND
FILED

2023 FEB - 7 AM 9:20

RECEIVED

2023 FEB - 7 AM 11:11

PROPERTY OFFICE
CORPORATIONS
TALLAHASSEE, FLORIDA

FEB - 8 2023

K. Brumley



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 7, 2023

CSC

SUBJECT: KIDS IN NEED OF DEFENSE, INC
Ref. Number: W23000016683

RESUBMIT
Please give original
submission date as file date.

We have received your document for KIDS IN NEED OF DEFENSE, INC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the title for Matthew Kessler-Vaughn.,

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.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 323A00002974

RECEIVED
2023 FEB -9 AM 11:30
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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

ACCOUNT NO. : I20000000195
REFERENCE : 389773 7773520
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 70.00

ORDER DATE : January 23, 2023
ORDER TIME : 8:51 AM
ORDER NO. : 389773-010
CUSTOMER NO: 7773520

FOREIGN FILINGS

NAME: KIND INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER: _____

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. KIND, 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.)

KIDS IN NEED OF DEFENSE, INC

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

2. District of Columbia 3. 26-2763038
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05-07-2008 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. 1/1/2023
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 1201 L St. NW floor 2, Washington, DC 20005
(Principal office street address)

(Current mailing address, if different)

8. PROVIDE LEGAL REPRESENTATION TO UNACCOMPANIED MINORS
(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32031
(City) (Zip Code)

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APPROVED AND FILED

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.

Corporation Service Company

By: Alexis W. [Signature], assistant vice president
(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. 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: Brad Smith
 Vice Chairman Address: 1201 L St NW Floor 2
 Director Washington, DC 20005
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Pamela Passman
 Vice Chairman Address: 1201 L St NW Floor 2
 Director Washington, DC 20005
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

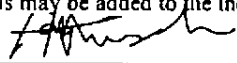
Chairman Name: Wendy Young
 Vice Chairman Address: 1201 L St NW Floor 2
 Director Washington, DC 20005
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Matthew Kessler-Vaughn
 Vice Chairman Address: 1201 L St NW Floor 2
 Director Washington, DC 20005
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Robert Cundall
 Vice Chairman Address: 1201 L St NW Floor 2
 Director Washington, DC 20005
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Hayford Mensah
 Vice Chairman Address: 1201 L St NW Floor 2
 Director Washington, DC 20005
 President _____
 Vice President _____
 Secretary Treasurer
 Other: CFO 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. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Hayford Mensah, Chief Financial Officer
(Typed or printed name and capacity of person signing application)

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF LICENSING AND CONSUMER PROTECTION
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

KIND, INC.

WE FURTHER CERTIFY that the domestic entity is formed under the law of the District on 05/07/2008 ; 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 1/24/2023 12:27 PM

Business and Professional Licensing Administration



Rebecca Janovich

REBECCA JANOVICH
Deputy Superintendent of Corporations,
Corporations Division

Muriel Bowser
Mayor

Tracking #: 1PiCLPcV