

W24000001228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

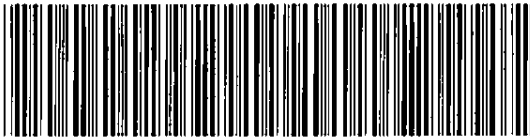
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STATE
INDEPENDENCE, MO

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COVER LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: Cochran Family Foundation, Inc.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	<u>\$78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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Peter Veldkamp

Name (printed or typed)

55 Campau Ave. NW, Suite 300

Address

Grand Rapids, MI 49503

City, State & Zip

(616) 233-5185

Daytime Telephone Number

pveldkamp@rhoadesmckee.com

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

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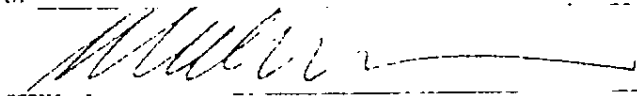
**NOT FOR PROFIT
CERTIFICATE OF DOMESTICATION**

The undersigned, George N. Cochran President
(Name) (Title)
of Cochran Family Foundation a foreign Corporation
(Corporation Name)
in accordance with section 617 1803, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was October 26, 2009
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was State of Illinois
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Cochran Family Foundation
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 617 01201 and 617 0202 with this certificate is Cochran Family Foundation, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was State of Illinois
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 617 1803

I am President of Cochran Family Foundation

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 30th day of November, 2023


(Authorized Signature)

Filing Fee:	
Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	<u>\$78.75</u>
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ARTICLES OF INCORPORATION
In compliance with Chapter 617, F S (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be

Cochran Family Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address shall be:

Principal Address

Mailing Address

212 Waterways Avenue

PO Box 1339

Boca Grande, FL 33921

Boca Grande, FL 33921

ARTICLE III PURPOSE

The purpose for which the corporation is organized:

To support charitable activities by making grants to unrelated organizations or institutions or
to individuals for scientific, educational, cultural, religious, or other charitable purposes.

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ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed

As stated by the bylaws.

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

The name(s) and address(es) and specific title(s)

Title/Name

President/Director, George N. Cochran

129 E. Front Street

Traverse City, MI 49684

Title/Name

Secretary/Director, Kelsey C. Lee

11 Wyngate Road

Greenwich, CT 06830

Title/Name

Treasurer/Director, Andrew C. Cochran

9 Country Lane

Northfield, IL 60093

Title/Name

Director, Brooks B. Cochran

913 Gilmore Ave

Nashville, TN 37204

Title/Name

Director, Charles F. Cochran

3346 N. Southport, #1S

Chicago, IL 60657

Title/Name

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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P O Box NOT acceptable) of the registered agent is:

George N. Cochran

212 Waterway Avenue

Boca Grande, FL 33921

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

George N. Cochran

212 Waterway Avenue

Boca Grande, FL 33921

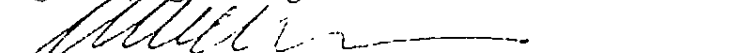
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

11/30/23

Date



Signature/Incorporator

12/1/23

Date

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