# F23000005237

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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2023 SEP 13 AM11: 01

APPROVED AND FILED

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SEP 14 2023 K. Brumbley



To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 09/13/23 Order #: 1264854-1

Re: Law Firm Antiracism Alliance, Inc.

Processing Method: Routine

#### TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.00 - FL State Account Number:

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auth

Please take the following action: File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

# 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. LAW FIRM A	NTIRACISM ALLIANCE, INC.		
	corporation; must include "INCORPORATED," 'Corp," "Inc," "Co," or "Corp.")	'COMPANY," "CORPORATION	1,"
N/A			
(If name unavail	able in Florida, enter alternate corporate name ad-	opted for the purpose of transacting	g business in Florida)
2. DELAWARE		N/A	
(State or country	ry under the law of which it is incorporated)	(FEI number, if app	plicable)
4. OCTOBER	1, 2020 5.		
(Date of incorporation)		(Date of duration, if other than perpetual)	
6.			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) , F.S., to determine penalty liabilit	(y)
7. 155 N. WACI	KER, CHICAGO, IL 60606		
	(Principal office	street address)	
	(Current mailing a	address, if different)	
			023
8. Name and street	et address of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)	SEP AP
Name:	CORPORATION SERVICE COMPANY	<del></del>	TANDEN STAND
Office Address:	1201 HAYS ST.	<del></del>	AH II:
	TALLAHASSE,	, Florida 32301	
	(City)	(Zip code)	6
Having been nam designated in this further agree to c	ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointment comply with the provisions of all statutes relatives and accept the obligations of my positions.	nt as registered agent and agre tive to the proper and complete ion as registered agent.	e to act in this capacity. I
	Drace C. Kuk	).Le	
_	(Registered agent's sign		<del></del>
10. Attached is a	certificate of existence duly authenticated, no	ot more than 90 days prior to de	livery of this application to

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS						
	Name: KIISHA MORROW	□ Chairman	Name: BRENNA DE VANEY			
□Vice Chairman	Address:	□Vice Chairman	Address: 155 N. WACKER DRIVE			
Director	CHICAGO, IL 60606	□Director	CHICAGO, IL 60606			
□President		□President				
□Vice President		□Vice President				
□Secretary	Treasurer	Secretary	□Treasurer			
Other CO-PRE	SIDENT Other	CO-PRES	SIDENT Other			
□Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	155 N WACKER DRIVE			
□Director	CHICAGO, IL 60606	□Director	CHICAGO, IL 60606			
□President		□President				
□Vice President		□Vice President	<u> </u>			
Secretary	□Treasurer	□Secretary	□Treasurer			
Other CO-VICE	E PRES.   Other	©O-VICE	PRES.			
Chairman	Name:	□Chairman	Name: KATHLEEN WACH			
□Vice Chairman	Address:	□Vice Chairman	Address: 155 N. WACKER DRIVE			
□Director	CHICAGO, IL 60606	□Director	CHICAGO, IL 60606			
□President		□President				
□ Vice President		□Vice President				
Secretary	□Treasurer	☐ Secretary	Treasurer			
□Other	Other	Other	Other			
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	Typed or printed name and capacity of person					
(1) per or primed mand and capacity of person signing application)						

#### **Additional Directors**

### **Executive Committee**

Tamara Caldas Harlene Katzman David Lash Rosalyn Nasdor Steven Schulman

## At Large Board Members

Artemis Anninos
Jeff Berman
William Chapman Jr.
Martha Fitzgerald
Lisa Harris
Robert Hover
Paul Kiernan
Paul Lee
Diane Lucas
Sibusiso Mbutho
Eve-Lynn J Rapp
Peter Wilson



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LAW FIRM ANTIRACISM ALLIANCE, INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF SEPTEMBER,

A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.



Authentication: 204152143

Date: 09-13-23