# F010000000589

TO: Registration Division of C	Section Corporations	3000035908539					
SUBJECT:	KOCH CRIME INSTITUTE, INC.	-01/29/0101135003 *****78.75 *****78.75					
SOBSECT	(Name of Corporation - must include suff	*****78.75 *****78.75					
Dear Sir or Madam:							
Affairs in Florida", "(	cation by Foreign Not for Profit Corporation for Au Certificate of Existence", and check are submitted to tion to conduct its affairs in Florida.						
Please return all corre	espondence concerning this matter to the following	:					
	JANICE C. PATTEN, CLA						
	(Name of Person)	3					
OXBOW CORPORATION							
(Firm/Company)							
	1601 FORUM PLACE, SUITE P-2						
(Address)							
(Address)  WEST PALM BEACH, FLORIDA 33401  (City/State and Zip Code)							
(City/State and Zip Code)							
For further information	on concerning this matter, please call:	FILED 129 PM 5: 00 IARY OF STATE AFSTI TO GAMA					
Janice Pat	al (	697–4300 time Telephone Number)					
(Name of Perso	( Alea Code & Day	time Telephone Number)					
STREET ADDRESS Registration Section Division of Corporati 409 E. Gaines St. Tallahassee, FL 3239	Registration Se ons Division of Co P. O. Box 6327	rection () () () () () () () () () () () () ()					
Enclosed is a check for	or the following amount:	·					
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & ☐ \$78.75 Filing F Certificate of Status Certified Copy						

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.	KOCH CRIME INSTITUTE, INC.			_		_		_
	(Name of corporation: must include the word "INCORPOI in language as will clearly indicate that it is a corporation at present. "Company" or "Co." may not be used as a corporation.	instead c	if a natural	nerson or no	ertnerchin if not	breviations of so contained	like im n the n	por ame
2.	Delaware (State or country under the law of which it is incorporated	3	31-158	0410		,		
								_
4.	12/18/1997 (Date of Incorporation)	5	Perpet	ual				
	(Date of Incorporation)		(Durati	on: Year cor	o. will cease to	exist or "perpe	tual")	
6.	01/01/2001			-		•		
-	(Date corporation first conducted Affairs in Flo	orida - Se	e sections	617.1501, 6.	7.1502, and 81	7.155, F.S.)		<del>-</del>
7	1601 Forum Place, Suite P-2							
٠,	(Principal office	address	)	AMPLE THE A .	<u> </u>			<u></u>
	West Palm Beach, Florida 3340							
	- (Current mailing	g address	)					
8.	To assist in the reduction of	crim	<b>e</b>	-				
	(Purpose(s) of corporation authorized in hom	ne state o	r country t	o be carried	out in the state	of Florida)		
Λ	Name and street allows (TN)					a a Trans		
У.	Name and street address of Florida registered age	e <b>nt:</b> (P.C	). Box or	Mail Drop	Box <u>NOT</u> acc	eptable) =		
	N. C.					平譜	01 JAN 29	
	Name: <u>Corporation Service Co</u>	mpany	7		-	33	$\sqrt{2}$	
Ωf	fice Address: 1201 Hays Street						9	
U,	nice Address.	<del></del>					. 70	
	Tallahassee	r	71	32301		TARY OF ST	යා	
	(City)	, r	norida	32301	(Zip Code)		5: 00	
						in the	<u> </u>	
10	). Registered agent's acceptance:	_	_					
Ha de:	aving been named as registered agent and to accept signated in this application, I hereby accept the app	service . ointme	of proces.	s for the ab	ove stated cor	poration at t	he pla	ce
Jui	riner agree to comply with the provisions of all statu	ites rela	tive to thi	e proper an	d complete pe	erformance o	f my	<b>y.</b> A
au.	ties, and I am familiar with and accept the obligation	ons of m	y positioi	ı as registei	red agent.			

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.

(Registered agent's signature)

Asst. Secretary

#### 12. Names and addresses of officers and/or directors:

#### A. DIRECTORS

Chairman:	
Address:	
Director	William I. Koch
Address:	1601 Forum Place, Suite P-2, W. Palm Beach, FL 33401
Director:	Zachary K. Shipley
Address:	1601 Forum Place, Suite P-2, W. Palm Beach, FL 33401
Director:	Richard P. Callahan
Address:	1601 Forum Place, Suite P-2, W. Palm Beach, FL 33401
B. OFFICERS	
President:	Frederick W. Wrighton, III
Address:	1601 Forum Place, Suite P-2, W. Palm Beach, FL 33401
Vice President:	
Address:	AN A
Secretary:	Richard P. Callahan
Address:	1601 Forum Place, Suite P-2, W. Palm Beach, FL 33401
Treasurer:	Zachary K. Shipley
Address:	1601 Forum Place, Suite P-2, W. Palm Beach, FL 33401
NOTE: If necessa	ry, you may attach an addendura to the application listing additional officers and/or directors.
13	ignature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	Richard P. Callahan, Secretary  (Typed or printed name and capacity of person signing application)

## State of Delaware Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KOCH CRIME INSTITUTE, 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 TWENTY-SECOND DAY OF JANUARY, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Warriet Smith Windson, Secretary of State

AUTHENTICATION: 0928464

DATE: 01-22-01

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