# F02000003183

TRANSMITTAL LETTER
TRANSMITTAL LETTER  TO: Registration Section Division of Corporations  SUBJECT: Greenleaf Capital Management Corp
TO: Registration Section
Division of Corporations
SUBJECT: Greenleaf Capital Management Corp
(Name of corporation - must include suffix)
w
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Geofrey J. Greenleaf
(Name of Person)
Greenleaf Capital Management Corp
(Firm/Company)
20600 Chagrin Blvd., Suite 803 (Address)
·
Shaker Hts., Ohio 44122
(City/State and Zip code)
For further information concerning this matter, please call:    Comparison
STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  Enclosed is a check for the following amount:  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  Enclosed is a check for the following amount:
\$70.00 Filing Fee  \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee,
Certificate of Status Certified Copy Certificate of Status &

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE REGISTER A FORI	WITH SECTION 607.1503, FLORID EIGN CORPORATION TO TRANSA	A SI CT I	IATUTES, THE BUSINESS IN T	HE STATE C	OF FLORIDA		*#\$ . c
_						017.06	5 X
(Name of corporat	af Capital Management Corpion; must include the word "INCORPOR- tions of like import in language as will cleartnership if not so contained in the name	RATE learly	ED", "COMPAN' indicate that it is	Y", "CORPOR s a corporation	ÁTION" or instead of a	ALON OF THE STATE	
2. Ohio		_ 3.	34-118	86795			SAP
(State or country un	nder the law of which it is incorporated)	_	()	FEI number, it	fapplicable)		
4. <u>1/12/76</u>		5.	Perpe	tual			_ *0
(Date of	of incorporation)	•	(Duration: Year	r corp. will ce	ase to exist or	"perpetual")	
6	Upon Qualification						
(Date first transacte	ed business in Florida. If corporation hat (SEE SECTIONS 607.	s not 1501	transacted busine , 607.1502 and 8	ess in Florida, 17.155, F.S.)	insert "upon q	ualification.'	")
7. 433	West Fourth St., Boca Gran (Principal office	<u>nde</u> add	, Florida : ress)	33921		· ·	<del></del> .
Same	as Above						
	(Current mailing	ş add	ress)				
Inve 8.	stment Advisory						
(Purpose(s)	of corporation authorized in home state	or co	ountry to be carrie	d out in state	of Florida)		<del>-</del>
9. Name and stree	et address of Florida registered age	ent:	(P.O. Box or M	fail Drop Bo	x <u>NOT</u> accep	table)	
Name:	Geofrey J. Greenleaf		<del></del>			÷	
Office Address: _	5000 Gasparilla Rd						
	Boca Grande		, Florida_	33921			
<del></del>	(City)	<del></del>		(Zip code)	<del></del>		
designated in this of further agree to co	ent's acceptance: ed as registered agent and to accept application, I hereby accept the application, and the state apply with the provisions of all state amiliar with and accept the obligation	ointi ites i	ment as register relative to the p	red agent and roper and co	d agree to ac implete perfo	t in this cap	acity. I
	(Registered ages	J.	ee leef	1			
	(Registered ager	it's s	ignature) (/				

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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman:	Geofrey J. Greenleaf
Address:	Shaker Hts., Ohio 44122
	Shaker Hts., Ohio 44122
Vice Chairman: _	
Address:	
Director:	Ensign J. Cowell
Address:	20600 Chagrin Blvd., Suite 803
-	Shaker Hts., Ohio 44122
Director:	S. Sterling McMillan III
Address:	20600 Chagrin Blvd., Suite 803
	Shaker Hts., Ohio 44122
B. OFFICERS	
President:	Geofrey J. Greenleaf
	20600 Chagrin Blvd., Suite 803
	Shaker Hts., Ohio 44122
Vice President:	Ensign J. Cowell
Address:	20600 Chagrin Blvd., Suite 803
	Shaker Hts., Ohio 44122
Secretary:	Ensign J. Cowell
Address:	20600 Chagrin Blvd., Suite 803, Shaker Hts., Ohio 44122
Treasurer:	Geofrey J. Greenleaf
Address:	20600 Chagrin Blvd., Suite 803, Shaker Hts., Ohio 44122
	ssary, 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	Geofrey J. Greenleaf, President  (Typed or printed name and capacity of person signing application)

## UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show GREENLEAF CAPITAL

MANAGEMENT CORPORATION, an Ohio Corporation, Charter No. 475980, having its principal location in Cleveland, County of Cuyahoga, was incorporated on January 12,

1976, and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 31st day of May, A.D. 2002.

Ohio Secretary of State

Validation Number: 200215001842