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FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

December 19, 2002

AMY HAMILTON, CLA THOMPSON HINE LLP 312 WALNUT STREET, 14TH FL CINCINNATI, OH 45202

SUBJECT: NATIONAL SPEAKING OF WOMEN'S HEALTH FOUNDATION

Ref. Number: W02000035433

We have received your document for NATIONAL SPEAKING OF WOMEN'S HEALTH FOUNDATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

We retained your certificate from Ohio in our office.,

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) 245-6043.

Joey Bryan Document Specialist Letter Number: 402A00066746

TRANSMITTAL LETTER

TO: Registration Section	
Division of Corporations	97 Table 1
SUBJECT: NATIONAL SPEAKING OF WOMEN'S HEALTH FOUNDATION	- 470, E.
(Name of Corporation – must include suffix)	4,0, 4
Dear Sir or Madam:	75.C. 74
The enclosed "Application by Foreign Not for Profit Corporation for Authoriza Affairs in Florida", "Certificate of Existence", and check are submitted to regis not for profit corporation to conduct its affairs in Florida.	
Please return all correspondence concerning this matter to the following:	
Amy Hamilton, CLA	
Amy Hamilton, CLA (Name of Person)	
Thompson Hine LLP	
(Firm/Company)	
312 Walnut St., 14th Floor (Address)	***
(1 total day)	
Cincinnati, OH 45202	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
tot tatuet information concerning this matter, prease care	
Amy Hamilton at (513) 352-6619 (Name of Person) (Area Code & Daytime T	alanhana Number
(Name of Person) (Area Code & Daytime 1	elephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 RAILING ADDRES Registration Section Division of Corporation Division of Corporation P. O. Box 6327 Tallahassee, FL 32319	ons
Enclosed is a check for the following amount:	
☐ \$70.00 Filing Fee	 \$87.50 Filing Fee, Certificate of Status & 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:

Name of corporation: must include the word "INC	ORPORATED" or "CORPORATION	i" or words or abbreviations o	of like import
in language as will clearly indicate that it is a corpor present. "Company" or "Co." may not be used as a	ration instead of a natural person or p	artnership if not so contained	the name at
2. Ohio	3 31-1576900	T'O	8 %
(State or country under the law of which it is incorp		FEI number, if applicable	2
4, 11/21/97	5. perpetual	£0	
(Date of Incorporation)	(Duration: Year co	rp. will cease to exist or "per	netical")
A STATE OF THE STA		4	CO R
6. Will not conduct business until author (Date corporation first conducted Affairs in F	lorida - See sections 617 1501 617 i	302 and 817 155 F.S.)	- Car 5
(Date corporation that conducted Atlants III I	Total - Dee Sections 017.1201, 017.1	202, 1010 017.102(1.0.)	76 Oz.
7 1223 Central Parkway, Cincinnati, OH	45214		70
	(Principal office address)		
Same			
<u> </u>	(Current mailing address)		
	<u>.</u>		
8. The education of women in making infor	med decisions about their p	ersonal heatth and wel	1-being.
(Purpose(s) of corporation authorize	ed in nome state of country to be care	ied out in the state of Profita)	
9 Name and street address of Florida register	ed agent: (P.O. Box or Mail Dro	Box NOT acceptable)	
9. Name and <u>street address</u> of Florida register	ed agent: (P.O. Box or Mail Dro	Box NOT acceptable)	
		Box NOT acceptable)	
9. Name and street address of Florida register Name: Corporation Service Company		p Box NOT acceptable)	. subp
Name: Corporation Service Company		p Box <u>NOT</u> acceptable)	, ,
		Box NOT acceptable)	e e e e e e e e e e e e e e e e e e e
Name: Corporation Service Company	· · · · · · · · · · · · · · · · · · ·	p Box <u>NOT</u> acceptable)	en e
Name: Corporation Service Company Office Address: 1201 Hays Street Tallahassee			
Name: Corporation Service Company Office Address: 1201 Hays Street	· · · · · · · · · · · · · · · · · · ·	Box NOT acceptable) (Zip Code)	
Name: Corporation Service Company Office Address: 1201 Hays Street Tallahassee (City)	· · · · · · · · · · · · · · · · · · ·		e e e e e e e e e e e e e e e e e e e
Name: Corporation Service Company Office Address: 1201 Hays Street Tallahassee (City) 10. Registered agent's acceptance:		(Zip Code)	o at the place
Name: Corporation Service Company Office Address: 1201 Hays Street Tallahassee (City) 10. Registered agent's acceptance: Having been named as registered agent and the service of the se	Florida 32301 to accept service of process for the	(Zip Code) e above stated corporation	at the place
Name: Corporation Service Company Office Address: 1201 Hays Street Tallahassee (City) 10. Registered agent's acceptance: Having been named as registered agent and the designated in this application, I hereby accept further agree to comply with the provisions	Florida 32301 to accept service of process for the appointment as registered as of all statutes relative to the pro	(Zip Code) e above stated corporation gent and agree to act in the	ils capacity.
Name: Corporation Service Company Office Address: 1201 Hays Street Tallahassee (City) 10. Registered agent's acceptance: Having been named as registered agent and to designated in this application, I hereby acceptance.	Florida 32301 to accept service of process for the appointment as registered as of all statutes relative to the pro	(Zip Code) e above stated corporation gent and agree to act in the	ils capacity.
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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 addresses of officers and/or directors:

A. DIRECTORS

Address:				- 10 To	2
	••			- Aric	'OS)
/ice Chairman:				Alt.	2. ~
ddress:	,, -:			ں' ــــــــــــــــــــــــــــــــــــ	
Director:					-7
					_
.ddress:	· · · · · · · · · · · · · · · · · · ·	·	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>
Director:					
Address:	<u></u>			<u>,</u>	<i>•</i>
, — — — — — — — — — — — — — — — — — — —	····	·		· · · · · · · · · · · · · · · · · · ·	
B. OFFICERS					
resident: Dianne Dunkelman		<u> </u>			
Address: 1223 Central Parkway	, h. 1	<u> </u>			<u>.</u>
Cincinnati, OH 45214	· · · · · · · · · · · · · · · · · · ·				
			,		
Address; 1223 Central Parkway					_ <u></u>
Cincinnati, OH 45214					
Address; 312 Walnut St., Cincinnati, OH 452	02 -				
Treasurer; Diane West					<u> </u>
Address: Suite 305, Kenwood Commons, 8280 Mon	ntgomery Rd.,	Cincinnati,	OH 45236	<u> </u>	
		4			
NOTE: If necessary, you may attach an addendum					S.
13. W Seuse Legum, (Signature of Chairman, Vice Chairm	Sacreta	er listed in nun	ber 12 of the a	onlication)	
tinguaters of Chantings, 4 to Chailing		etary			

NATIONAL SPEAKING OF WOMEN'S HEALTH FOUNDATION

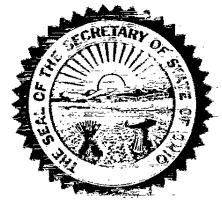
LIST OF CURRENT TRUSTEES

	Address 1223 Central Parkway, Cincinnati, OH 45202
Name	Address
Dianne Dunkelman	1223 Central Parkway, Cincinnati, OH 45202
Lorrence T. Kellar	1223 Central Parkway, Cincinnati, OH 45202
Julia Hanser	1223 Central Parkway, Cincinnati, OH 45202
Peter Hursh	1223 Central Parkway, Cincinnati, OH 45202
Phoebe Pardo	1223 Central Parkway, Cincinnati, OH 45202
Richard Erickson	2500 PNC Center, 201 E. Fifth St., Cincinnati, OH 45202
Sue Sherman	1223 Central Parkway, Cincinnati, OH 45202
Denise Kuprionis	312 Walnut St., Cincinnati, OH 45202
Patricia Mann Smitson	312 Walnut St., 14th Floor, Cincinnati, OH 45202
Diane West	Suite 305, Kenwood Commons, 8280 Montgomery Rd., Cincinnati, OH 45236
Kristine Malkoski	1223 Central Parkway, Cincinnati, OH 45202

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 NATIONAL SPEAKING OF WOMEN'S HEALTH FOUNDATION, an Ohio not for profit Corporation, Charter No. 997634, having its principal location in Cincinnati, County of Hamilton, was incorporated on November 21, 1997, 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 12th day of December, A.D. 2002.

Ohio Secretary of State

Validation Number: 200234601348