SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Requestor's Name) (Address)	300013021393
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	03√04/0301052011 **78.75



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03 MAR -4 PM 2: 02

SECRETAR March 32, 2003 TALLAHASSEE, FLORIDA CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Wellin Family Foundation, Inc.			
Filing Evidence ☐ Plain/Confirmation Copy		Type of Docume Certificate of Sta	
□ Certified Copy		☐ Certificate of Go	od Standing
		☐ Articles Only	
Retrieval Request Photocopy Certified Copy		☐ All Charter Docu Articles & Amen ☐ Fictitious Name	dments
NEW FILINGS		AMENDMENTS	
Profit		Amendment	
Non Profit		Resignation of RA Officer/Director	
Limited Liability		Change of Registered Agent	
Domestication		Dissolution/Withdrawal	
Other		Merger	
	1,-		1
OTHER FILINGS		REGISTRATION/QUALIFICATION	
Annual Reports	X	Foreign	
Fictitious Name		Limited Liability	
Name Reservation		Reinstatement	
Reinstatement		Trademark	
		Other	

FILED

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTOGRIZATION 2002 CONDUCT ITS AFFAIRS IN FLORIDA

SECRETARY OF STATE IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUMMATED FOR, FLORIDA REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

Or "CORPORATION" or words or abbreviations of like impos of a natural person or partnership if not so contained in the name ix by a nonprofit corporation.)
75~3087525
(FEI number, if applicable)
Perpetual (Duration: Year corp. will coase to exist or "perpetual")
(Duration: Year corp. will coase to exist or "perpetual")
l its affairs in Florida.
ctions 617.1501, 617.1302, and 817.135, F.S.)
O. Box 31051, Rochester, NY 14603-1051
•
ing address)
charitable organizations that will mak
ns are made better places to live.
te or country to be carried out in the state of Florida)
, , , , , , , , , , , , , , , , , , , ,
O. Box or Mail Drop Box NOT acceptable)
Inc.
•
Florida 32301 (Zip Code)
(esp coss)
en e
ice of process for the above stated corporation at the plo
nent as registered agent and agree to act in this capacil
s relative to the proper and complete performance of m
f my position as registered agent.
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V Duni

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.

FILED 12. Names and addresses of officers and/or directors: 03 MAR -4 PM 2: 02 A. DIRECTORS SECRETARY OF STATE Thomas M. Farace -TALLAHASSEE, FLORIDA Chairman: Clinton Square, P.O. Box 31051 Address: _ Rochester, New York 14603 Vice Chairman: N/A____ Address:__ Director: N/A Address:___ N/A _____ Director:___ Address:__ B. OFFICERS President: Thomas M. Farace Address: Clinton Square, P.O. Box 31051 Rochester, New York 14603 Vice President: N/A Address: Secretary: Thomas M. Farace Address: Clinton Square, P.O. Box 31051, Rochester, New York 14603 Treasurcr: Keith S. Wellin 161 Coquille Way, Vero Beach, Florida 32963 Address:___ NOTE: If necessary, you may attach as addendum to the application listing additional officers and/or directors.

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

Thomas M. Farace, President

Delaware The First State

FILED

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JEUNETARY OF STATE

TALLAHASSEE, FLORIDA

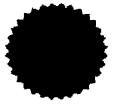
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE CERTIFICATE OF INCORPORATION OF "WELLIN FAMILY FOUNDATION, INC.", WAS RECEIVED AND FILED IN THIS OFFICE THE TWENTY-FIRST DAY OF OCTOBER, A.D. 2002.

AND I DO FURTHER CERTIFY THAT THE AFORESAID CORPORATION 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 AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS A NON-PROFIT AND NON-STOCK CORPORATION.

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

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



Warriet Smith Mindson, Secretary of States

AUTHENTICATION: 2280155

DATE: 02-27-03