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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: INTERVARSITY CHRISTIAN FEI (Name of Corporate	LOWSHIP/USA INCORPORATED tion – must include suffix)
Dear Sir or Madam:	, and the second se
The enclosed "Application by Foreign Not for Profit Affairs in Florida", "Certificate of Existence", and condition for profit corporation to conduct its affairs in Florida.	check are submitted to register the above referenced
Please return all correspondence concerning this ma	atter to the following:
Ralph I. Thomas	of Person)
(ivaine c	Person)
INTERVARSITY CHRISTIAN (Firm/C	FELLOWSHIP/USA Company) FELLOWSHIP/USA Company) FELLOWSHIP/USA Company)
РО ВОХ 7895	Property Pro
<u> </u>	dress)
(City/State a	and Zip Code)
For further information concerning this matter, plea	ise call:
Ralph I. Thomas at	
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:	
X \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy 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:

import in langua	RVARSITY CHRISTIAN FELLOUSHIP/USA INCORPORATED or "CORPORATION" or words or abbreviations of like age as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)	
2. ILLINO	DIS 3. 36-2171714	
(State or cour	orts 3. 36-2171714 (FEI number, if applicable)	
4 Nove	ember 14, 1941 5 Perpetual	
(<u>C</u>	Date of Incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")	
6. <u>Approx</u>	t. 1973 lucted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determine penalty liability.)	
(Date first condu	nucted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determine penalty liability.)	
7. <u>6400 SCH</u>	HROEDER ROAD, MADISON WISCONSIN 53711 (Principal office address)	
	(Principal office address)	
		_
POBOX/_	7895, MADISON, WISCONSIN 53707-7895 (Current mailing address)	7
To establ	lish and advance at colleges and universities witnessing communities of 🖫	
	who follow Jesus as Savior and Lord.	
(Purpose(s) of c	Lish and advance at colleges and universities witnessing communities of who follow Jesus as Savior and Lord. corporation authorized in home state or country to be carried out in the state of Florida)	
		٠
Name and street	reet address of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	EVAN KELLER	
Office Address:	136 SOUTH SHERIDAN AVENUE	
Office Address.	136 SOUTH SHERIDAN AVENUE	
	—.	
	(City) (Zip Code)	
IO Danistanad	1	
Having hoon na	l agent's acceptance: amed as registered agent and to accept service of process for the above stated corporation at the place	
designated in th	his application, I hereby accept the appointment as registered agent and agree to act in this capacity. I	
further agree to	o comply with the provisions of all statutes relative to the proper and complete performance of my duties	i,
and I am famili	iar with and accept the obligations of my position as registered agent.	
	O 1	
	5 1/200	
	- Con feeler	
	(Registered agent's signature)	

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	
Chairman: SEE ATTACHED	
Address:	
Vice Chairman:	
Address:	
	0
Director:	F.C. S
Address:	5
	Ho
Director:	100 ST
Address:	<u>Ou</u> ,
B. OFFICERS	
President: SEE ATTACHED	
Address:	
Vice President:	and and
Address:	
Secretary:	
Address:	-1-8-,-1, -1
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional off	
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the contract	he application)

14. Ralph I. Thomas, Secretary

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

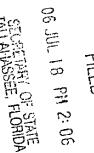
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OTHER OFFICERS

Charles B. Ford, VP	IVCF-USA, P.O. Box 7895, Madison, WI 53707-7895	608/443-3652
Robert A. Fryling, VP	IV Press, PO Box 1400, Downers Grove, IL 60515	630/734-4001
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Ralph I. Thomas, Secretary	IVCF-USA, P.O. Box 7895, Madison, WI 53707-7895	608/443-3749
Mark Felton, Treasurer	IVCF-USA, P.O. Box 7895, Madison, WI 53707-7895	608/443-3730

May 22, 2006





To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this

and A.D.2006.

Desse White