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SECRETARY OF STATE
TALLAHASSEF, FLORING

## **COVER LETTER**

TO: New Filing Section Division of Corporations SUBJECT: Pamela and Leslie Muma Family Foundation, Inc. (Name of Corporation – must include suffix) Dear Sir or Madam: The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida. Please return all correspondence concerning this matter to the following: Leslie M. Muma (Name of Person) (Firm/Company) 100 Palmetto Road (Address) Belleair, Florida 33756 (City/State and Zip Code) For further information concerning this matter, please call: Pamela S. Muma at (727) 584-7877 (Area Code & Daytime Telephone Number) (Name of Person) STREET/COURIER ADDRESS: **MAILING ADDRESS:** New Filing Section New Filing Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: \$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee,

Certified Copy

Certificate of Status & Certified Copy

Certificate of Status

## 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. Pamela and Leslie Muma Family Foundation, Inc. (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbit import in language as will clearly indicate that it is a corporation instead of a natural person or partnership:	reviations of like	
import in language as will clearly indicate that it is a comporation instead of a natural person or partnership in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation	on.)	
2. Wisconsin 3. 39-1933039 (State or country under the law of which it is incorporated) (FEI number, if applicable)		
4. June 16, 1998  (Date of Incorporation)  5. Perpetual (Duration: Year corp. will cease to exist of the components)		
(Date of Incorporation) (Duration: Year corp. will cease to exist of	or "perpetual")	
6. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determ	nine penalty liability.	)
100 Palmetto Road, Belleair, Florida 33756		ن ن
(Principal office address) 100 PALMETTO ROAD, BELLEAIR, FLORIDA 33756 7960 N. River Road, River Hills, Wisconsin 53217		
(Current mailing address)  8. Charitable Foundation (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	2006 SI	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	SECRETARY	-
Name: Leslie M. Muma		
Office Address: 100 Palmetto Road	PH 2: 33	422
Belleair , Florida 33756 (Zip Code)	<i>Σ</i> , α	

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered 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)

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

A. DIRECTORS		
Chairman: Leslie M. Muma		
Address: 100 Palmetto Road		
Belleair, Florida 33756		
Vice Chairman:		
Address:		
Director: Pamela S. Muma		
Address: 100 Palmetto Road		<u> </u>
Belleair, Florida 33756		
Director: Lisa D. Weitz		
Address: 6 Guerard Road		<u> </u>
Charleston, South Carolina 29407	$\vec{\Sigma}_{S}$	20
B. OFFICERS	CORE	38 SE
President: Leslie M. Muma	TAR ASS	70 <u> </u>
Address: 100 Palmetto Road	E.O.	
Belleair, Florida 33756	- S	<u>5</u>
Vice President:	57	<u>အ</u> —
Address:		_
Secretary: Pamela S. Muma		
Address: 100 Palmetto Road, Belleair, Florida 33756		
Treasurer: Pamela S. Muma		
Address: Same as above	<u> </u>	<u></u>
		<b>.</b>
NOTE: If necessary, you may attach an addendum to the application listing additional officers	and/or direc	tors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the ap	oplication)	
14. Leslie M. Muma, Chairman  (Typed or printed name and capacity of person signing application)		
(Then & brimanina and advantal or beream arguing abburganes)		

# United States of America State of Wisconsin

#### DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

### PAMELA AND LESLIE MUMA FAMILY FOUNDATION, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is June 16, 1998.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official scal of the Department on August 18, 2006.

RAY ALLEN, Deputy Administrator Division Of Corporate & Consumer Services Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code: 29795-3ABAA476