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(Re	equestor's Name)	
(Ac	ldress)	
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(Do	ocument Number)	ii
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On:	lv



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2006 DEC 19 PN 2: 59
SECRETARY OF STATE
TALLAHASSEF FLORIDA

T. Burch DEC 20 2006

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COVER LETTER

TO:	New Filing Section Division of Corporations			,
SUBJ	ECT: Paul & Annetta Himm			on, Inc.
Dear S	ir or Madam:			
Affairs	sclosed "Application by Foreign Not for Pross in Florida", "Certificate of Existence", and profit corporation to conduct its affairs in F	check are su		
Please	return all correspondence concerning this m	natter to the f	ollowing:	
E١	van D. Harms			
		of Person)		
	Grossberg, Yochels		& Beyda	LLP
	(Firm/	Company)	`	
	2000 L Street, NW		· · · · <u>-</u> · · ·	
	Suite 675			
	(A	ddress)		_
	Washington, DC 200	036 and Zip Cod	<u>a)</u>	
	(City/State	and Zip Coc	ic)	
For fu	rther information concerning this matter, ple	ase call:		
Eva	an D. Harms	, 202	. 296 - 96	96
	(Name of Person)	(Area Coo	le & Daytime To	elephone Number)
	•			
	MAILING ADDRESS:			OURIER ADDRESS:
	New Filing Section Division of Corporations		New Filing S Division of C	
	P.O. Box 6327		Clifton Build	
	Tallahassee, FL 32314		Tallahassee,	ve Center Circle FL 32301
Enclos	sed is a check for the following amount:	•		
\$7 0	.00 Filing Fee \$\sum \text{T8.75 Filing Fee & Certificate of Status}		Filing Fee & Tied Copy	\$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:

1. Paul & Annetta Himmelfarb Foundation, Inc.	_	
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of lik import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contain in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)	ē ied	
_{2.} Delaware _{3.} 52-0784206		
(State or country under the law of which it is incorporated) (FEI number, if applicable)	-	
4. 12/12/1947	_	
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")	-	
6. Upon registration (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liab	īlity.)	
7. 4545 42nd Street, NW, Washington, DC 20016 (Principal office address)		
(Principal office address)		
4545 42nd Street, NW, Washington, DC 20016	4 2	
(Current mailing address)	ੇ ਲ	
	38 BB	
8. Ownership and operation of real estate (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)) 	i
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	Y DE C	i
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		
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Name: NRAI Services, Inc.	9	
Office Address: 2731 Executive Park Dr, Suite 4		
Weston , Florida 33331		
(City) (Zip Code)		
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the designated in this application, I hereby accept the appointment as registered agent and agree to act in this cap further agree to comply with the provisions of all statutes relative to the proper and complete performance of the p	acity. I	! es,
and I am familiar with and accept the obligations of my position as registered agent.	•	٠
NRAI Selvices, Inc.		
By: Kinda Diven, Oast. Secretary 12-07-06 XONDA DIVEN (Registered agent's signature)		
✓ XONDA DIVEN (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: Michael E. Preston
Address: 9525 Lagersfield Circle ≅
Vienna VA 22181-6180
Vice Chairman: Paul Himmelfarb
Address: 1499 Massachusetts Ave., NW, Apartment 1412
Washington DC 20005
Director: Norma Lee Naiman /
Address: 3703 Bloomsbury Court
Silver Spring, MD 20906
Director: Lauren K. Hester
Address: 22442 Maison Carree Square
Ashburn VA 20148
B. OFFICERS President: Paul Himmelfarb
Address: 1499 Massachusetts Ave., NW, Apartment 1412
Washington DC 20005
Vice President: Norma Lee Naiman
Address: 3703 Bloomsbury Court
Silver Spring, MD 20906
Secretary: Lauren K. Hester
Address: 22442 Maison Carree Square, Ashburn VA 20148
Treasurer: Michael E. Preston Zana
Address: 9525 Lagersfield Circle, Vienna VA 22181-6180
NOTE: If pecessary, you may attach an 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)
Michael E. Preston, Executive Director (Typed or printed name and capacity of person signing application)
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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PAUL & ANNETTA HIMMELFARB FOUNDATION, INC." 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, AS OF THE FIFTH DAY OF DECEMBER, A.D. 2006.

2006 DEC 19 PN 2: 59
SECRETARY OF STATE
TALLAHASSEE FI CAME.



Varuet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5249394

DATE: 12-05-06

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