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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Working Partners 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:
Robert G. Simses, Esq. (Name of Person)
Simses & Associates, PA
(Firm/Company)
400 Royal Palm Way; Suite 304
(Address)
Palm Beach, FL 33480
(City/State and Zip Code) (City/State and Zip Code)
For further information concerning this matter, please call:
Robert G. Simses (Name of Person) at (561) 835-1313 (Area Code & Daytime Telephone Number)
(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:
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status 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:

Working Partners Foundation (Inc.)	
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or ablimport in language as will clearly indicate that it is a corporation 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 corporati	oreviations of like if not so contained
∘ Colorado	on.,
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. October 22, 2004 5. Perpetual	
(Date of Incorporation) (Duration: Year corp. will cease to exist	or "perpetual")
_{6.} January 15, 2007	
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determ	
_{7.} <u>400 Royal Palm Way; Suite 304; Palm Bea</u> ch, FL	33480
(Principal office address)	
400 Royal Palm Way; Suite 304; Palm Beach, FL	33480
(Current mailing address)	**************************************
, Humanitarian Relief	
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	500
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	7 3.
Name: Robert G. Simses, Esq	
Office Address: 400 Royal Palm Way	F (2)
Palm Beach , Florida 33480	
(City) (Zip Code)	>
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corp designated in this application, I hereby accept the appointment as registered agent and agree to a further agree to comply with the provisions of all statutes relative to the proper and complete per and I am familiar with and accept the obligations of my position as registered agent.	act in this canacity. I
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: Robert G. Simses			
Address: 400 Royal Palm Way; Suite 304			* <u>_</u>
Palm Beach, FL 33480	1 12 14		
Vice Chairman:			ੂਰੀ ਕਾ ਹਵਾਲੇ
Addrage			<u>.>.</u>
Addiess		2.1	**** <u>***</u>
Director	<u>.</u>		. =
Director:	* <u>5</u> . + * +	·	
Address:	da S	-	
Director		; • •	· ·- ·
Director: Address:		र कुलीन	;
Address			e a series de la companya de la comp
B. OFFICERS	- A		***
President: Robert G. Simses, Esq		07	
Address: 400 Royal Palm Way; Suite 304	<u> </u>		
Palm Beach, FL 33480	7.50	9 =	F E E E
**			- -
Vice President:	= = =	3 -	-
Address:	<u> </u>		<u>_</u>
Secretary: Robert G. Simses			· * ******
Address: 400 Royal Palm Way; Palm Beach, FL 33480			Than a
Address: Robert G. Simses		<u>.</u>	e de la companya de l
Address: 400 Royal Palm Way; Palm Beach, FL 33480			· <u>-</u> -
Address: 400 Royal Fail I Vvay, Fail Beach, 1 L 33400	.: +±	*	
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	nd/or direc	tors,	
13 John & Frimm		- •	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	lication)		े प्रत्या संस्था
14. Robert G. Simses, Chairman (Typed or printed name and capacity of person signing application)			• • •
· · · · · · · · · · · · · · · · · · ·			

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE

I, Mike Coffman, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Working Partners Foundation

is a Nonprofit Corporation

formed or registered on 10/22/2004 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20041371565.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/11/2007 that have been posted, and by documents delivered to this office electronically through 01/17/2007 @ 13:43:18.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 01/17/2007 @ 13:43:18 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 6679404.



Mike Collins

Secretary of State of the State of Colorado

****************End of Certificate**************************

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do, entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click Business Center and select "Frequently Asked Questions."