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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**FILED**  
13 JAN 14 AM 11:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*K 01/15/13*

John K. Bartosz  
Attorney at Law  
Certified Financial Planner  
jkb@kingsburyfirm.com



THE KINGSBURY FIRM, LLC

January 8, 2013

New Filing Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: I Back Jack Foundation, Inc.

Dear Sir or Madam:

Enclosed please find an original and one copy of the "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida" necessary for the above captioned foreign non-profit corporation to transact business in your state along with a check for the appropriate filing fee (\$70). Lastly, enclosed is an original Certificate of Status as issued electronically by the State of Wisconsin. A Certificate of Status is also referred to as a Certificate of Existence or Certificate of Good Standing. Wisconsin provides for electronic validation of its Certificates of Status. You may validate the Certificate of Status by visiting the following website <http://www.wdfr.org/apps/ccs/verify/> and entering the following validation number 115615-B9FC9E29.

Please file the original document and return a "filed" stamped copy of the same to my office using the return envelope provided.

Very Truly Yours,

The Kingsbury Firm, LLC

John K. Bartosz

JKB:mb  
Enclosures

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** I Back Jack 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", or "Certificate of Status" 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:

John K. Bartosz

Name of Person

I Back Jack Foundation, Inc. c/o The Kingsbury Firm, LLC

Firm/Company

709 Milwaukee St.

Ste A

Address

Delafield, WI 53018

City/State and Zip Code

jkb@kingsburyfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John K. Bartosz

Name of Person

at ( 414 ) 378-4419

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 & Certificate of Status      ☐ \$78.75 Filing Fee & Certified 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. I Back Jack Foundation, Inc.  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Wisconsin 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09/21/2006 5. perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 709 Milwaukee Street, STE A, Delafield, WI 53018  
(Principal office address)  
709 Milwaukee Street, STE A, Delafield, WI 53018  
(Current mailing address)
8. Please see attached  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)  
Name: Northwest Registered Agent LLC  
Office Address: 3030 N. Rocky Point Dr. STE 150A  
Tampa, Florida 33607  
(City) (Zip Code)

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**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.*



Dan Keen-Manager

(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: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

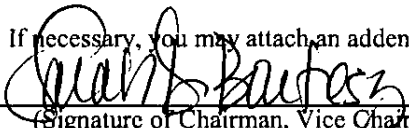
Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Sarah D. Bartosz, President  
(Typed or printed name and capacity of person signing application)

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**2013 List of Officers/Directors for I Back Jack Foundation, Inc.**

<b>Name</b>	<b>Title</b>	<b>Address</b>
Sarah Bartosz	Director/President	385 Prairie Grass Ct. Hartland, WI 53029
Amy MacLean	Director	W310 N6764 Chenequa Dr. Hartland, WI 53029
Beth Lunow	Director/Vice President	12900 Ohio Drive New Berlin, WI 53151
Brian Anderson	Director	407 Prairie Grass Ct. Hartland, WI 53029
John Shinnars	Director	W303 N1760 Maple Ave. Pewaukee, WI 53072
Rory Leyden	Director	W332 N6578 N. Moose Lane Nashotah, WI 53058
Shannon Allen	Director	5123 N. Bay Ridge Ave. Whitefish Bay, WI 53217
John Bartosz	Secretary	709 Milwaukee St., STE A Delafield, WI 53018
Kathleen Giorgi	Treasurer	c/o First Business Bank 18500 W. Corporate Drive Brookfield, WI 53045

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### **Purposes and Powers**

The Corporation is organized and shall be operated exclusively for charitable, educational, and scientific purposes within the meaning of I.R.C. 501(c)(3). Such purposes may include, but are not limited to, promoting and advancing the science and art of medicine related to the study of pediatric cancer cells, including, but not limited to, neuroblastoma cells and related structures, supporting and enhancing education in neuroblastoma and other pediatric oncology fields, facilitating and improving prevention, diagnosis, and treatment of disorders affecting such cells and related structures, and doing and engaging in any and all activities that may be necessary or incidental to any or all of the foregoing purposes.

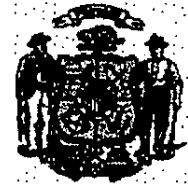
For such purposes and not otherwise, and subject always to the further provision of these Articles, the Corporation shall have and exercise only such powers as are required by and are consistent with the foregoing purposes, including the power to acquire and receive funds and property of every kind and nature whatsoever, whether by purchase, conveyance, lease, gift, grant, bequest, legacy, devise, in trust, or otherwise, and to own, hold, manage, administer, and to make gifts, grants, and contributions of, and to expend, convey, transfer, and dispose of, any and all funds and property and the income therefrom in furtherance of the purposes of the Corporation hereinabove set forth, or any of them, and to lease, mortgage, encumber, and use the same, and such other powers which are consistent with the foregoing purposes and which are afforded to the Corporation by the WNCL. Provided, however, that the Corporation shall not carry on any activity not permitted to be carried on by an organization that is described in I.R.C. Sections 501(c)(3) and 509(a)(3) and is exempt from federal income taxes under I.R.C. Section 501(a) or by an organization that is described in, and contributions to which are deductible for federal income tax purposes under I.R.C. Section 170(c)(2).

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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, PAUL M. HOLZEM, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

**I BACK JACK 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 September 21, 2006.

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 seal of the Department on January 7, 2013.

*Paul M. Holzem*

PAUL M. HOLZEM, Administrator  
Division of Corporate and 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: 115615-B9FC9E29

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