

F13000001759

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : GREENSPOON MARDER, P.A.
Account Number : 076064003722
Phone : (888) 491-1120
Fax Number : (954) 343-6962

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

gregg@wasie.org

FOREIGN PROFIT/NONPROFIT CORPORATION
THE WASIE FOUNDATION, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
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Corporate Filing Menu

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13 APR 23 AM 9:34
DIVISION OF STATE
ADMINISTRATIVE SERVICES

RECEIVED
13 APR 23 PM 4:34
DIVISION OF CORPORATION

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1505, 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. THE WASIE 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 of present "Company" or "Co." may not be used as a corporate suffix by a non-profit corporation.)

2. Minnesota

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

3. 10/18/1986

(Date of incorporation)

4. Perpetual

(Duration. Your corp. will cease to exist or "perpetual")

5. upon filing this application with the State

(Note that Florida allows to incorporate prior to registration. See 617.1501 & 617.1502, F.S. for temporary residency liability.)

6. 401 East Las Olas Boulevard, Suite 1400, Fort Lauderdale, FL 33301

(Principal office address)

401 East Las Olas Boulevard, Suite 1400, Fort Lauderdale, FL 33301

(If not principal office address)

7. All lawful business and Philanthropy

(The purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Gregg D. Sjoquist

Office Address: 401 East Las Olas Boulevard, Suite 1400

Fort Lauderdale

(City)

Florida

33301

(Zip Code)

9. 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.

(Registered agent's signature)

10. 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.

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TALLAHASSEE, FLORIDA

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12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Gregg D. Sjoquist, Director

Address: 401 East Las Olas Boulevard, Suite 1400, Fort Lauderdale, FL 33301

Vice Chairman:

Address:

Director: Regina C. Bergeron

Address: 401 East Las Olas Boulevard, Suite 1400, Fort Lauderdale, FL 33301

Director: Linda M. Cooke

Address: 401 East Las Olas Boulevard, Suite 1400, Fort Lauderdale, FL 33301

B. OFFICERS

President: Gregg D. Sjoquist

Address: 401 East Las Olas Boulevard, Suite 1400, Fort Lauderdale, FL 33301

Vice President: Regina C. Bergeron

Address: 401 East Las Olas Boulevard, Suite 1400, Fort Lauderdale, FL 33301

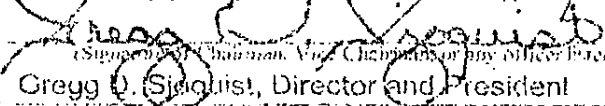
Secretary: Linda M. Cooke

Address: 401 East Las Olas Boulevard, Suite 1400, Fort Lauderdale, FL 33301

Treasurer: Regina C. Bergeron

Address: 401 East Las Olas Boulevard, Suite 1400, Fort Lauderdale, FL 33301

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

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

1. Gregg D. Sjoquist, Director and President

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

STATE OF FLORIDA
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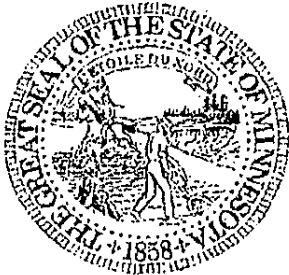
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Office of the Minnesota Secretary of State
Certificate of Good Standing

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:	The Wasie Foundation
Date Filed:	10/18/1966
File Number:	G-165
Minnesota Statutes, Chapter:	317A
Home Jurisdiction:	Minnesota

This certificate has been issued on: 04/22/2013



Mark Ritchie
Mark Ritchie
Secretary of State
State of Minnesota

STATE OF MINNESOTA
FALLS BOULEVARD, FLORIDA

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