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### COVER LETTER

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

SUBJECT: SeniorNet, 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:

# Andrew Dye Name of Person

Webster, Chamberlain & Bean

Firm/Company

1747 Pennsylvania Avenue, NW

**Suite 1000** 

Address

Washington, DC 20006

City/State and Zip Code

andrewd@wc-b.com

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

For further information concerning this matter, please call:

Andrew Dve

at (202) 785-9500
Area Code & Daytime Telephone Number

Name of Person

#### 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. SeniorN						_
(Name of corpo import in langu- in the name at p	oration: must include the word "INCO age as will clearly indicate that it is a present. "Company" or "Co." may not	RPORATED" or "CORPORATION" corporation instead of a natural persor be used as a corporate suffix by a non	or words or abb or partnership profit corporation	reviations if not so co on.)	of like ontain	ed
<sub>2.</sub> Virginia		<sub>3.</sub> 30-0594290				
(State or cou	ntry under the law of which it is incor	porated) (FEI number	r, if applicable)			-
		5 Perpetual				
··(]	r 29, 2009 Date of Incorporation)	(Duration: Year corp. wi	ll cease to exist	or "perpet	ual")	_
	lucted affairs in Florida if prior to regist	ration. See sections 617.1501 & 617.15	02, F.S, to deteri	mine penal	ty liab	īlity.)
<sub>7.</sub> 5237 Su	mmerlin Commons Blv		, FL 3390	7		
	(	Principal office address)				_
12801 W	orldgate Drive, Ste. 500					_
		(Current mailing address)				_
8. Provide (Purpose(s) of	education to current an	nd next generations of our country to be carried out in the state	older adult	ts.		-
9. Name and str	eet address of Florida registered a	gent: (P.O. Box <u>NOT</u> acceptable)		$\mathbf{E}_{\mathbf{S}}$		
Name:	Leslie M. Smith			LAHA		ed to the
Office Address:	5237 Summerlin Commons Bl	vd. Ste 314			.2 P	erst en
	Fort Myers	, Florida 33907		<u> </u>	PH 3: 44	e de la companya de l
	(City)		(Zip Code)		=	
Having been no designated in th further agree to	I agent's acceptance: amed as registered agent and to a his application, I hereby accept the comply with the provisions of al h familiar with and accept the obl	e appointment as registered agen I statutes relative to the proper an	t and agree to d complete pe	act in th	is cap	acity. I
	Mall	legistered agent's signature)				
	(1)	-District about a pithimitato)				

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: Leslie M. Smith			
Address: 5237 Summerlin Commons Blvd. Suite 3	14		
Fort Myers, FL 33907			
Vice Chairman: Alfred Moye			
124 Gramercy Drive			
San Mateo, CA 94402			
Paul Sladkus			
Address: 33 Flatbush Avenue, Suite 4			
Brooklyn, NY 11217			
Director: Paul DelPonte			
Address: 11114 Hillsdale Drive	Po	14	
Kensington, MD 20895	) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (		or A
B. OFFICERS	60 E	ι, 1	Marine Se
President:	نيار. نيار	골	; -
Address:	22	က္	· ,
	A	+-	
Vice President:			
Address:			
Secretary:			
Address:			
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application li	sting additional officers and/or dir	ectors.	
13. (Signature of Chairman, Vice Chairman, or any officer listed	d in number 12 of the application)		
14. Les lie M. Smith, Chairman  (Typed or printed name and capacity of person	aloning analication)		
( 1 yped of printed hame and capacity of person	i Signing application)		

## Common brealth of Hirginia



## State Corporation Commission

### CERTIFICATE OF GOOD STANDING

### I Certify the Following from the Records of the Commission:

That SeniorNet is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is December 29, 2009;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

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Signed and Sealed at Richmond on this Date: December 10, 2013

Joel H. Peck. Clerk of the Commission

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