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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

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

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

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only

*W14-63293*



000262301850

10/14/14--01032--023 \*\*70.00

**FILED**  
14 OCT 30 AM 9:52  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

NOV 6 2014

**S. GILBERT**

## COVER LETTER

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

**SUBJECT:** Meier Clinics Foundation

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:

Heather Gandy

Name of Person

Meier Clinics Foundation

Firm/Company

2100 Manchester Rd, Ste 1510

Address

Wheaton, IL 60187

City/State and Zip Code

hgandy@meierclinics.com

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

For further information concerning this matter, please call:

Heather Gandy

Name of Person

at ( 630 ) 653-1717 x.217

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 17, 2014

HEATHER GANDY  
2100 MANCHESTER RD, STE 1510  
WHEATON, IL 60187

SUBJECT: MEIER CLINICS FOUNDATION  
Ref. Number: W14000063293

RECEIVED  
14 OCT 30 AM 10:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for MEIER CLINICS FOUNDATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert  
Regulatory Specialist-II  
New Filing Section

Letter Number: 114A00022270

**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. Meier Clinics 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.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California

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

3. 75-2845878

(FEI number, if applicable)

4. 7/14/1999

(Date of Incorporation)

5. Perpetual

(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. 2100 Manchester Rd, Ste 1510 Wheaton, IL 60187

(Principal office address)

2100 Manchester Rd, Ste 1510 Wheaton, IL 60187

(Current mailing address)

8. counseling services

(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: C T Corporation System

Office Address: 120 South Pine Island

Plantation

(City)

Florida 33324

(Zip Code)

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14 OCT 30 AM 9:52  
TALLAHASSEE, FLORIDA

**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.*

Kristin Bolden

(Registered agent's signature)

**Kristin Bolden  
Assistant Secretary**

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: Eric Hobbs

Address: Michael, Best & Friedrich

100 E. Wisconsin Ave, Ste 330, Milwaukee, WI 53202

Vice Chairman: J. Abede Alexandre

Address: 50 Marshall's Corner Road

Brockton, MA 02301

Director: Charlie Platipodis

Address: 15049 Claymoor Court #12

Chesterfield, MO 63017

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

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

**B. OFFICERS**

President: (also Director) Nancy Brown

Address: 2100 Manchester Rd, Ste. 1510

Wheaton, IL 60187

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

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

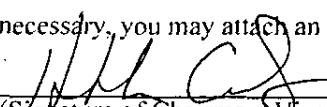
Secretary: (also Director) Paul Meier

Address: 2150 Lakeside Blvd., Ste. 100, Richardson, TX 75082

Treasurer: Heather Gandy

Address: 2100 Manchester Rd, Ste 1510, Wheaton, IL 60187

**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. Heather Gandy, Treasurer/CFO

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

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

**ENTITY NAME:**

**MEIER CLINICS FOUNDATION**

**FILE NUMBER:** C2169661  
**FORMATION DATE:** 07/14/1999  
**TYPE:** DOMESTIC NONPROFIT CORPORATION  
**JURISDICTION:** CALIFORNIA  
**STATUS:** ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of September 24, 2014.

*Debra Bowen*

**DEBRA BOWEN**  
Secretary of State