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Division of Corporations  
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FOREIGN PROFIT/NONPROFIT CORPORATION  
ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI, INC.

Certificate of Status	0
Certified Copy	1
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# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

## 1. ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

## 2. New York

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

## 3. 13-6171197

(FBI number, if applicable)

## 4. Provisional: June 28, 1963 - Absolute May 24, 1968

(Date of incorporation)

## 5. Perpetual

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

## 6. Upon Filing

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

## 7. 1 Gustave L. Levy Place, New York, NY 10029

(Principal office address)

## 1 Gustave L. Levy Place, New York, NY 10029

(Current mailing address)

## 8. Any lawful business permitted by the laws of the State of Florida.

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

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

Name:

**NRAI SERVICES, INC.**

Office Address:

**1200 South Pine Island Road**

**Plantation**

(City)

**, Florida 33324**

(Zip code)

## 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.*

*Michelle Holder, Asst Sec*

(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 business addresses of officers and/or directors:

## A. DIRECTORS

Chairman: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

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

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

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

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

## B. OFFICERS

President: CEO - Kenneth DavisAddress: 1 Gustave L. Levy Place, New York, NY 10029Vice-President: EVP - Arthur KleinAddress: 1 Gustave L. Levy Place, New York, NY 10029Secretary: EVP - Donald ScanlonAddress: 1 Gustave L. Levy Place, New York, NY 10029Treasurer: EVP - Beth EssigAddress: 1 Gustave L. Levy Place, New York, NY 10029

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

13. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, P.S.

14. Arthur Klein, EVP

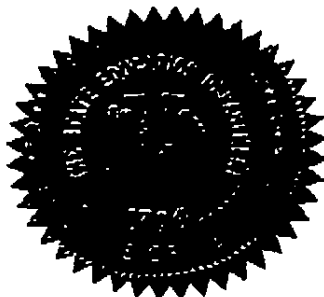
(Typed or printed name and capacity of person signing application)

*The University of the State of New York*  
**Education Department**



STATE OF NEW YORK )  
 ) ss.:  
 COUNTY OF ALBANY )

I, Richard J. Trautwein, Counsel and Deputy Commissioner for Legal Affairs for the New York State Education Department, hereby certify that the Icahn School of Medicine at Mount Sinai, located in the city, county, and State of New York, was incorporated by action of the Board of Regents by the issuance of a provisional charter under the corporate name "Mount Sinai Hospital School of Medicine" on June 28, 1963; that such provisional charter was amended on December 18, 1964 to change the corporate name to "Mount Sinai School of Medicine"; amended October 27, 1967 to change the corporate name to "Mount Sinai School of Medicine of the City University of New York"; made absolute on May 24, 1968; amended July 17, 1998 to include a name change to "Mount Sinai School of Medicine of New York University" effective as of July 1, 1999; amended October 19, 2010 to change the corporate name to "Mount Sinai Hospital School of Medicine" effective November 18, 2010; amended December 11, 2012 to change the corporate name to "Icahn School of Medicine at Mount Sinai"; that the period for which such corporation was created is perpetual; that no certificate or order of dissolution of such corporation has been filed or issued; and that such corporation is currently authorized to do business in the State of New York.



IN WITNESS WHEREOF, I hereunto set my hand and affix the seal of the University of the State of New York and of the State Education Department at the City of Albany, New York on this 27th day of February, 2015.

*Richard J. Trautwein*

Richard J. Trautwein  
 Counsel and Deputy Commissioner  
 For Legal Affairs

15 MAR 10 AM 8:55  
 DEPARTMENT OF STATE  
 ALBANY, N.Y. 12242