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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.

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## FOREIGN PROFIT/NONPROFIT CORPORATION IMMUNE DEFICIENCY FOUNDATION

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From:

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June 3, 2015

# FLORIDA DEPARTMENT OF STATE Division of Corporations

NATIONAL CORPORATE RESEARCH

SUBJECT: IMMUNE DEFICIENCY FOUNDATION

REF: W15000038756

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

Please return 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.

Carol Mustain Regulatory Specialist II

FAX Aud. #: H15000131178 Letter Number: 415A00011640

#### 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:

Immune Deficiency Foundation Corp	ed ed	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	_	
Delaware 3,52-1214782		
(Sinte or country under the law of which it is incorporated)  (FEI number, if applicable)	-	
1. 12/11/1980 5. Perpetual (Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")	<b></b>	
6. (Date first conducted affairs in Florida if prior to registration. See sections 617,1501 & 617,1302, F.S. to determine penalty light	īliņs)	
, 110 West Road, Suite 300, Towson, MD 21204		
(Principal office address)	ping .	
110 West Road, Suite 300, Towson, MD 21204		
(Current multing address)	- 	드
	<del>ن</del> ت	SES
To improve the diagnosis, treatment and quality of the of percons with priviary immunorialities or diseases through advocacy, education and research (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	8 I KNF	무취
(Purpose(s) in europeation approximation in thomas in an action of the state in Figures.)	~	유동
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		60.4
Name: NATIONAL CORPORATE RESEARCH, LTD., INC.	NH 10: 2	SECRETARY OF STATE
	ب	<u> </u>
Office Address: 155 Office Plaza Drive	-	7
Tallahaaaaa 22204		
Tallahassee, Florida 32301		

duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agents signature)

AUNIANIE EVANIAS DEST - SECY.

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.

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12. Names and addresses of officers and/or directors	
A. DIRECTORS	
Chairmen: John Seymour	
Address: 344 Cardinal Drive, Mankato, MN 56001	_
CAMP 1 No.	
Vice Choirman:	***
	-
Address:	-
	-
Director:	····
Address:	<u>ت</u>
	<u> </u>
Director:	-8
Address:	-E
	څ
B. OFFICERS	2
President: Marcia Boyle	···•
Address: 110 West Road Suite 300, Towson, MD 21204	
management, a consequence of the production of the contract of	
Vice President: Katherine Antilla	
Address: 110 West Road Suite 300, Towson, MD 21204	••
	_
Scendary:	
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)	
Sarah Rose, Chief Financial Officer	
(Typed or printed name and capacity of person signing application)	

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#### Officers & Directors Addendum

#### Marcia Boyle

President & Founder 110 West Road Suite 300, Towson, MD 21204

#### Katherine Antilla

Vice President, Education and Volunteers 110 West Road Suite 300, Towson, MD 21204

#### Christine Belser

Vice President, Programs and Communications 110 West Road Suite 300, Towson, MD 21204

#### Lawrence A. LaMotte

Vice President, Public Policy 110 West Road Suite 300, Towson, MD 21204

#### Julie Nzambi

Human Resources & Office Manager 110 West Road Suite 300, Towson, MD 21204

#### Sarah Rose

Chief Financial Officer 110 West Road Suite 300, Towson, MD 21204

#### John Seymour

Chairman of the Board of Directors 344 Cardinal Drive, Mankato, MN 56001 15 儿母 18 所10:21

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DIVISION OF CORPCRAIT

From:

(((H15000131178 3)))

# Delaware

# The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IMMUNE DEFICIENCY FOUNDATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IMMUNE DEFICIENCY FOUNDATION" WAS INCORPORATED ON THE ELEVENTH DAY OF DECEMBER, A.D. 1980.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

0904457 8300C

150863682

You may verify this certificate online at corp.delaware.gov/authver.shtml

jeffrey W. Bullock, Secretary of State

TION: 2426092

DATE: 06-02-15