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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 03 2016
J. HARRIS

109907-2171

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Benefits Data Trust, 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:

DeAnna L. Minus-Vincent

Name of Person

Benefits Data Trust

Firm/Company

2 Logan Square

Suite 550

Address

Philadelphia, PA 19103

City/State and Zip Code

dmvincent@bdtrust.org

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

For further information concerning this matter, please call:

DeAnna Minus-Vincent

Name of Person

at (215)
Area Code

207-9116

Daytime Telephone Number

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration 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



Two Logan Square, Suite 550 . Philadelphia, PA 19103
Ph 215.207.9100 . Fx 215.207.9111

WWW.BDTRUST.ORG

February 2, 2016

Registration Section
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

To whom it may concern:

Benefits Data Trust (BDT), a national not-for-profit organization based in Pennsylvania, seeks to register to conduct business in the State of Florida. Please find enclosed the following:

- Cover letter form
- Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida
- Original Certificate of Existence
- Resolution of the Board of Directors to Adopt an Alternate Name for Use in Florida
- \$87.50 Check for Filing Fee, Certificate of Status & Certified Copy

Should you have any questions, please do not hesitate to contact me. I can be reached by phone at (215) 207-9116, or by email at dmvincent@bdtrust.org.

Sincerely,

DeAnna Minus-Vincent
Director of External Relations



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 11, 2016

DEANNA L MINUS-VINCENT
2 LOGAN SQUARE, SUITE 550
PHILADELPHIA, PA 19103

SUBJECT: BENEFITS DATA TRUST
Ref. Number: W16000010669

We have received your document for BENEFITS DATA TRUST and your check(s) totaling \$87.50. 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.

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) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 016A00002984

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. Benefits Data Trust, 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. Pennsylvania 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. September, 2005 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)
6. July 1, 2016
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)
7. 2 Logan Square, Suite 550, Philadelphia, PA 19103
(Principal office address)

(Current mailing address, if different)

8. to assist low-income individuals access public benefits and income supports
(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: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (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.

Nicole Chouinard

Nicole Chouinard, Assistant Secretary

(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.

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TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Warren Kantor
Address: 2 Logan Square, Suite 550
Philadelphia, PA 19103

Vice Chairman: Tom Shaffert
Address: 2 Logan Square, Suite 550
Philadelphia, PA 19103

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Ginger Zielinskie
Address: 2 Logan Square, Suite 550
Philadelphia, PA 19103

Vice President: _____
Address: _____

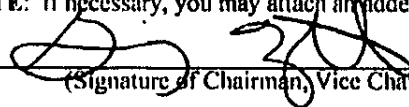
Secretary: _____
Address: _____

Treasurer: _____
Address: _____

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TALLAHASSEE, FLORIDA

FILED

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. Ginger Zielinskie, President
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

12/10/2015

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

BENEFITS DATA TRUST

is duly registered as a Pennsylvania Non-Profit (Non Stock) under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set
my hand and caused the Seal of the Secretary's
Office to be affixed, the day and year above written

Pedro A. Contes

Secretary of the Commonwealth

Certification Number: TSC151210131048-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify.aspx>