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SECRETARY OF STATE FALL AHASSEE, FLORIDA

#### **COVER LETTER**

	Registration Se Division of Co	orporations							
SHRI	IFCT: Institute to	Reduce Spending, Inc.							
SUL	EC1	Name of Corporation	on – must in	clude suffix	<del></del>				
Dear S	Sir or Madam:								
Affair	s in Florida", "Ce	ion by Foreign Not for Profi rtificate of Existence", or "C enced not for profit corporat	Certificate of	Status" and ch	eck are submitted to				
Please	return all corresp	ondence concerning this ma	itter to the fo	llowing:					
	Jonathar	ı M. Bydlak							
Name of Person  Institute to Reduce Spending, Inc.									
	P.O. Box 1031								
		Add	dress						
	Alexand	iria, VA 22313							
	<del></del>	City/State a	nd Zip Code	<b>3</b>	<del> </del>				
	jonathan	@spendinginstitute.org							
	E-n	nail address: (to be used for	future annua	l report notifica	ation)				
For fu	rther information	concerning this matter, plea	se call:						
Jonathan M. Bydlak 2.			202	503-6551					
	Name o	of Person	Area Code	Daytime Tel	ephone 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						
Enclo	sed is a check for	the following amount:							
<b>=</b> \$7	0.00 Filing Fee	☐\$78.75 Filing Fee & Certificate of Status		Filing Fee & ed 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:

(11 manie unava	ilable in Florida, enter alternate corporate name adopted for	the purpose of transacting business in Florid	da)
Virginia	3		
November 5, 2	012 5	Date of duration if other than personal	
1/1/2017	are of incorporation)	Date of duration, if other than perpetual)	
Date first cond	icted affairs in Florida if prior to registration. See sections 617.	.1501 & 617.1502. F.S. to determine penalty	liability.
919 Prince Stre	(Principal office addres	6)	
	(Thielpai office address	<b>,</b>	
Alexandria, V			
	(Current mailing address, if d	itterent)	
A 501(c)(3) no Purpose(s) of c	n-profit organization that engages in scholarship on the sub- corporation authorized in home state or country to be carried	ject of federal spending and budgeting.  Tout in the state of Florida)	<del></del>
Name and str	eet address of Florida registered agent: (P.O. Box NO	<u>T</u> acceptable)	17 J
	Jamesham M. Davillala	400	
Name:	Jonathan M. Bydlak		<b>ω</b> ,
Name:			
			0 14 7
fice Address:	2228 Trailwood Drive  Cantonment , Florida  (City)	32533 (Zip Code)	0 1 7
fice Address:  Registered wing been na		(Zip Code)  (Zip Code)  (Zip Code)  (Zip Code)	the pla

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

Chairma	Jonathan M. Bydlak .n:			
Address	2228 Trailwood Drive			
	Cantonment, FL 32533			
Vice Ch	Haris Hadzimuratovic			
Address	Kirkland & Ellis LLP			
	300 North LaSalle, Chicago, IL 60654			
Director	Eric Kohn			
Address	3305 Jared Drive		•	_
Addiess	Swansea, IL 62226	· · · · · · · · · · · · · · · · · · ·		
Director	Ryan Shafik			
Address	5482 Rinker Circle	No.		
Addicss	Douglestown, PA 18902	E C	<del> </del>  7 J	
D OF	EICEDS	- <del> </del>		,,
B. Or	FICERS Jonathan M. Bydlak	386 XX	8	<u> </u>
Presiden	u:	<u> </u>	*	
Address	2228 Trailwood Drive	ျက်မျှ	7:	) ) }
	Cantonment, FL 32533	λl í: Mið	63) 188	
Vice Pre	N/A esident:	72		
Address				_
				_
Secretar	Jonathan M. Bydlak y:			
Address	see above			_
Treasure	Haris Hadzimuratovic			
Address	see above			_
	•			_
NOTE:	: If necessary, you may attach an addendum to the application listing additional officers and	l/or direct	ors.	
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applic			
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applic	ation)		
14. <u>Jo</u>	nathan M. Bydlak, President			
	(Typed or printed name and capacity of person signing application)			

# Common brealth of Hirginia



# State Corporation Commission

### CERTIFICATE OF GOOD STANDING

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

That Institute to Reduce Spending, Inc. is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is November 5, 2012;

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.



Signed and Sealed at Richmond on this Date: January 11, 2017

CISECOM

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