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1/27/2017 Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
THE ARTHRITIS FOUNDATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	$70.00

RECEIVED 2017 JAN 30 AM 9:31 FLORIDA DEPARTMENT OF STATE TALLAHASSEE, FLORIDA

FILED 2017 JAN 30 A 9:24 SECRETARY OF STATE TALLAHASSEE FLORIDA

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S Warren
JAN 31 2017

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: THE ARTHRITIS FOUNDATION, 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:

Catherine McClellan
Name of Person

The Arthritis Foundation, Inc.
Firm/Company

1355 Peachtree St NE #600

Address

Atlanta GA 30309
City/State and Zip Code

cmclellan@arthritis.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Catherine McClellan at (404) 965-7647
Name of Person 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

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. THE ARTHRITIS 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.)

The Arthritis Foundation, Inc. Of GA
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

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

3. 58-1341679
(FEI number, if applicable)

4. 2/17/1978
(Date of Incorporation)

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

6. 07/01/2016
(Date first conducted affairs in Florida if prior to registration. *See sections 617.1301 & 617.1502, F.S. to determine penalty liability.*)

7. 1355 PEACHTREE ST, Suite 600, ATLANTA, GA, 30309
(Principal office address)

1355 PEACHTREE ST, Suite 600, ATLANTA, GA, 30309
(Current mailing address)

8. Voluntary Health Agency
(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: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip Code)

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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.

By: C T Corporation System Jennifer Quinn, 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.

12. *Names and addresses of officers and/or directors*

A. DIRECTORS

Chairman: See attached

Address: _____

_____

Vice Chairman: _____

Address: _____

_____

Director: _____

Address: _____

_____

Director: _____

Address: _____

_____

B. OFFICERS

President: See attached

Address: _____

_____

Vice President: _____

Address: _____

_____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Catherine R McClellan
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Catherine McClellan, VP of Legal Affairs/Assistant Secretary
(Typed or printed name and capacity of person signing application)

Control Number : H813112

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

THE ARTHRITIS FOUNDATION, INC.

a **Domestic Nonprofit Corporation**

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number	: 13879135
Date Inc/Auth/Filed	: 02/17/1978
Jurisdiction	: Georgia
Print Date	: 01/19/2017
Form Number	: 211

Brian P. Kemp
Secretary of State

The Arthritis Foundation, Inc.

Executive Committee

Chair
Rowland W. (Bing) Chang
1355 Peachtree St NE #600
Atlanta GA 30309

Vice Chair
Patrician Hannon
1355 Peachtree St NE #600
Atlanta GA 30309

Treasurer
Frank Longobardi
1355 Peachtree St NE #600
Atlanta GA 30309

Secretary
Laurie Stewart
1355 Peachtree St NE #600
Atlanta GA 30309

VP Legal Affairs
Catherine McClellan
1355 Peachtree St NE #600
Atlanta GA 30309

Immediate Past Chair
Michael V. Ortman
1355 Peachtree St NE #600
Atlanta GA 30309

President & CEO
Ann M. Palmer
1355 Peachtree St NE #600
Atlanta GA 30309

Dennis Ehling
1355 Peachtree St NE #600
Atlanta GA 30309

Matt Mooney
1355 Peachtree St NE #600
Atlanta GA 30309

Dennis Mowrey
1355 Peachtree St NE #600
Atlanta GA 30309

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Board of Directors

Mary Battle
1355 Peachtree St NE #600
Atlanta GA 30309

Eileen Boone
1355 Peachtree St NE #600
Atlanta GA 30309

K. Andrew Crighton
1355 Peachtree St NE #600
Atlanta GA 30309

Helen Emery
1355 Peachtree St NE #600
Atlanta GA 30309

Randeep Kahlon
1355 Peachtree St NE #600
Atlanta GA 30309

Michael Moriarty

Joseph Nellis
1355 Peachtree St NE #600
Atlanta GA 30309

David Pleasance
1355 Peachtree St NE #600
Atlanta GA 30309

Cavan Redmond
1355 Peachtree St NE #600
Atlanta GA 30309

Anthony Rizzo, Jr.
1355 Peachtree St NE #600
Atlanta GA 30309

W. Hayes Wilson
1355 Peachtree St NE #600

Atlanta GA 30309