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June 30, 2017

DEBBIE WHITEHEAD 8435 NE GLISAN ST PORTLAND, OR 97220 US

SUBJECT: MULTNOMAH UNIVERSITY, CORP

Ref. Number: W17000046764

We have received your document for MULTNOMAH UNIVERSITY, CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must include the purpose(s) for which the corporation is authorized in the home state or country to be carried out in the state of Florida. Please make such correction to number 8 of the application.

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.

Letter Number: 317A00011123

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

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:

If nume unavai	lable in Florida, enter alternate co	reporate name adopted for the purpose of transacting business in	Florida)
Oregon		3 93-0398802	
(State or coun	try under the law of which it is inc		
10/7/1937		5.	
(1)	ate of Incorporation)	(Date of duration, if other than perpetu	<u>al)</u>
Date fina condu	cted affairs in Florida if prior to reg	gistration. See sections 61* 1501. & 617.1502, F.S. to determine pe	maley Habilly)
8435 NE Olisa	St. Portland, OR 97220		
		(Principal office address)	

	(Cur	ment multing address, if different)	严恕 一
	orporation sulhorized in home sta	ducuiffy le series at Indianaliae it is or incentive) and agent: (P.O. Box NOT acceptable)	Activities by
_	InCom Services, Inc		
Name:	InCorp Services, Inc.		SPA .
Name: ,	17888 67th Court North		iA: ORIDA
Name: ,	17888 67th Court North Loxahatchee	, Florida ³³⁴⁷⁰	iA:
Name: ,	17888 67th Court North		iA:: ORIDA

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.

4

12. Names and addresses of officers and/or directors

A. DI	RECTORS		
Chairm	Glenn Zirkle		
Addres	8435 NE Glisan St		
	Portland, OR 97220		
Violet	Jay-Mosser hairman:		
	8435 NE Glisan St		
/ titeli t.a:	Portland, OR 97220	· (v—+	Manager 1955 - 7
Directo	Craig Williford, President		
Address	8435 NE Glisan SI		,,,,,,
/ Gures:	Portland, OR 97220	-115	***************************************
Directo	Joyce Schroeder		
Address	8435 NE Glisan St		
Addi Ca	Portland, OR 97220	3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	_:
	FFICERS Craig Williford	CAHAS	- Jng 4 <u>1</u>
Address	8435 NE Glisan St	SEE	
	Portland, OR 97220	F.'S.	
Vice Pr	Gina Berquist	RO	5
	8435 NE Glisan St		
	Portland, OR 97220		- y-
Secreta	TV:	gy hyvy - 19.4 119 119-ii: 49.49.499	**********
Freasur	Chandler Wilson, VP of Finance and Administration		
Address	8435 NE Glisan ST, Portland, OR 97220	-	
13. <u>/</u>	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application handler Wilson, VP of Finance and Administration		
	(Typed or printed name and capacity of person signing application)		-

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:

		corporate table adopted for the purpose of dates	acting business in Florida)
		DZ GZGGGG	
Oregon		ncorporated) 3, 93-0398802 (FEI number, if a	
(State of cou	ntry under the law of which it is i	ncorporated) (PEI number, 11 a)	ppneaute)
10/7/1937	S	5. (Date of duration, if o	those there magnetically
(1	rate of incorporation)	(Date of Buration, 11 of	нает нав регрешан
		registration. See sections 617,1501 & 617,1502. F.	
			S, to determine penalty liability
8435 NE Glisa	in St, Portland, OR 97220		
		(Principal office address)	
	(C	urrent mailing address, if different)	产 和 士
			≥Ş d
Payroll		tate or country to be carried out in the state of FI	\$ 2 E
Purpose(s) of	corporation authorized in home s	tate or country to be carried out in the state of FI	orida) SSS
	eet address of Florida register	red agent: (P.O. Box NOT acceptable)	177
dame and ste		ed agent. (1.10). Box 15471 december	
Name and str	er mouters on the transfer		
			S T S
Name:	InCorp Services, Inc.		STATE ORID
Name:	InCorp Services, Inc. 17888 67th Court North		M D: 49 UFSTALE FLORIDA
Name:	InCorp Services, Inc.	Florida 33470	S IA S IA IO A IO A IO A IO A IO A IO A

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.

(Registered agent's signature)

Jessica Chappell on behalf of InCorp Services, Inc.

12. Names and addresses of officers and/or directors

A. DIH	RECTORS	
Chairma	Glenn Zirkle	
Address:	8435 NE Glisan St	
7 Tagress	Portland, OR 97220	
Vice Ch	Jay Mosser	
Address	8435 NE Glisan St	
Addits.	Portland, OR 97220	
Director	Craig Williford, President	and the second s
Address:	8435 NE Glisan St	· · · · · · · · · · · · · · · · · · ·
Addicss.	Portland, OR 97220	27
Disserve	Joyce Schroeder	
Address	8435 NE Glisan St	Service Control
Authess	Portland, OR 97220	M. S.
R OF	FICERS	7 CO 7
Presiden	Craig Williford	All S
Address	8435 NE Glisan St	
Mulicss	Portland, OR 97220	
Vice Pre	Gina Berquist	
Address	8435 NE Glisan St	and of the second secon
Address	Portland, OR 97220	
Secretary	у:	
Address		
Freasure	Chandler Wilson, VP of Finance and Administration	
Address:	8435 NE Glisan ST, Portland, OR 97220	- 1-10 Cr
NOTE:	If necessary, you may attach an addendum to the application listing additional officers are	nd/or directors.
13/_	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the appl	ication)
. Ch	resignature of Charman, vice Charman, or any officer fisted in humber 12 of the appliandler Wilson, VP of Finance and Administration	icaion <i>j</i>
14	(Typed or printed name and capacity of person signing application)	

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State of Oregon

OFFICE OF THE SECRETARY OF STATE Corporation Division

Certificate of Existence 895V304M1

I, DENNIS RICHARDSON, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

MULTNOMAH UNIVERSITY

is

a Nonprofit Corporation

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

Sleamed Schardson

DENNIS RICHARDSON, SECRETARY OF STATE

5/24/2017