

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-5383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (512)418-5949
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.

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RECEIVED
2017 JUL 18 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION
PURDUE NEWU, INC

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$87.50

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TALLAHASSEE, FLORIDA

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K. SALY
JUL 19 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Purdue NewU, 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:

Nancy Decker
Name of Person

Purdue University
Firm/Company

610 Purdue Mall, Hovde Hall, Room 246
Address

West Lafayette, IN 47907
City/State and Zip Code

nadecker@purdue.edu
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tanisha D. Willoughby at (765) 496-7947
Name of Person Area Code 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

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. Purdue NewU, 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. Indiana (State or country under the law of which it is incorporated) 3. N/A (FEI number, if applicable)

4. 04/26/2017 (Date of Incorporation) 5. (Date of duration, if other than perpetual)

6. N/A (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 9000 Keystone Crossing #300, Indianapolis, IN 46240 (Principal office address)

(Current mailing address, if different)

8. To operate, conduct, and administer a degree granting and credit bearing post-secondary educational institution (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: William E. Sullivan
Office Address: 6301 Kaplan University Avenue, Fort Lauderdale, Florida 33309
(City) (Zip Code)

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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:

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

A. DIRECTORS

Chairman: Michael R. Berghoff
Address: 610 Purdue Mall, Hovde Hall, Room 247, West Lafayette, In 47907

Vice Chairman: Paul A. Bott
Address: 610 Purdue Mall, Hovde Hall, Room 247, West Lafayette, In 47907

Director: JoAnn Brouillette
Address: 610 Purdue Mall, Hovde Hall, Room 247, West Lafayette, In 47907

Director: Malcolm S. DeKryger
Address: 610 Purdue Mall, Hovde Hall, Room 247, West Lafayette, In 47907

B. OFFICERS

President: Mitchell E. Daniels, Jr.
Address: 610 Purdue Mall, Hovde Hall, Room 247, West Lafayette, In 47907

Vice President: Betty Vancenbosch
Address: 610 Purdue Mall, Hovde Hall, Room 247, West Lafayette, In 47907

Secretary: Nancy A. Decker
Address: 610 Purdue Mall, Hovde Hall, Room 246, West Lafayette, In 47907

Treasurer: William E. Sullivan
Address: 610 Purdue Mall, Hovde Hall, Room 247, West Lafayette, In 47907

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

13. William E. Sullivan
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. William E. Sullivan
(Typed or printed name and capacity of person signing application)

State of Indiana Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

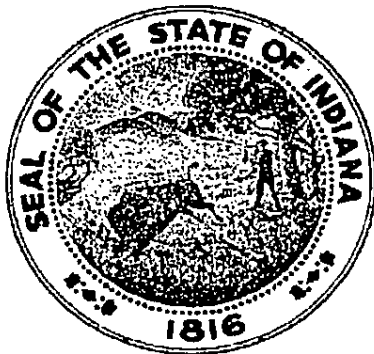
I further certify that records of this office disclose that

PURDUE NEWU, INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on April 26, 2017, and was in existence or authorized to transact business in the State of Indiana on July 18, 2017.

I further certify this Domestic Nonprofit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.

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In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, July 18, 2017

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

201704261193233 / 2017359537

Verify this certificate: <https://bsd.sos.in.gov/ValidateCertificate>