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Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations						
SHR	FCT. WORKFO	RCE ALLIANCE OF SOUTH	CENTRAL K	ANSAS, INC.			
SOBO	<u> </u>	Name of Corporati	on – must in	clude suffix			
Dear S	Sir or Madam:						
Affair	s in Florida", "Ce	ion by Foreign Not for Prof rtificate of Existence", or "C enced not for profit corporat	Certificate of	Status" and ch	eck are submitted to		
Please	return all corresp	oondence concerning this ma	atter to the fo	ollowing:	• •		
	ASHLE	Y N. BANDASACK					
		Name (of Person				
	ALLEN	. GIBBS & HOULIK, L.C.					
		Firm/C	Company				
	301 N MAIN						
SUITE 1700							
		Ad	dress				
	WICHI	ΓA, KS 67202					
		City/State a	and Zip Code	<u> </u>			
	CHAD@	WORKFORCE-KS.COM					
	E-n	nail address: (to be used for	future annua	l report notifica	ation)		
For fu	rther information	concerning this matter, plea	ase call:	•	,		
at (()	267-7231			
	Name o	of Person	Area Code	Daytime Tel	ephone Number		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				Registration S Division of C Clifton Buildi	orporations ing ve Center Circle		
Enclo	sed is a check for	the following amount:					
= \$7	0.00 Filing Fce	□\$78.75 Filing Fee & Certificate of Status		Filing Fee & ed Copy	S87.50 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:

•	E ALLIANCE OF SOUTH CENTRAL KANSAS, INC.		619	_
import in langua in the name at p	ation: must include the word "INCORPORATED" or "CORPORATION" or words or ablige as will clearly indicate that it is a corporation instead of a natural person or partnership resent. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.	oreviation of not so on.)	s of lik contain	e ied
WORKFORCE	ALLIANCE, INC.			
(If name unava	ilable in Florida, enter alternate corporate name adopted for the purpose of transacting bus	siness in I	Florida)
KANSAS	atry under the law of which it is incorporated) 3. 48-1248107 (FEI number, if applicable)			
	atry under the law of which it is incorporated) (FEI number, if applicable)		_
04/23/2001	5			
(0)	Date of Incorporation) 5. (Date of duration, if other than	perpetua	l)	_
(Date first cond	ucted affairs in Florida if prior to registration. See sections 617 1501 & 617 1502 F.S. to deter	rmine nen	alty lini	51/11
	ucted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502. F.S. to deter	rmine pen	alty liai	bilit
	LAS , SUITE 850, WICHITA, KS 67202	rmine pen	alty liai	bi lit
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	LAS , SUITE 850, WICHITA, KS 67202	rmine pen	alty liai	bilir, —
. 300 W DOUG	(Current mailing address, if different)	rmine pen	alty liai	biliq
. 300 W DOUG	(Current mailing address, if different)			Біін — —
. 300 W DOUG	LAS , SUITE 850, WICHITA, KS 67202 (Principal office address)		alty liai	- -
This Corporati	(Principal office address) (Current mailing address, if different) on is organized exclusively for charitable purposes as a not-for-profit corporation. corporation authorized in home state or country to be carried out in the state of Florida)			bilir -
This Corporati	(Current mailing address, if different)		2818 JUL	Біііц —
This Corporati (Purpose(s) of c	(Principal office address) (Current mailing address, if different) on is organized exclusively for charitable purposes as a not-for-profit corporation. corporation authorized in home state or country to be carried out in the state of Florida) cet address of Florida registered agent: (P.O. Box NOT acceptable)			bilit
This Corporati (Purpose(s) of c	(Principal office address) (Current mailing address, if different) on is organized exclusively for charitable purposes as a not-for-profit corporation. corporation authorized in home state or country to be carried out in the state of Florida) eet address of Florida registered agent: (P.O. Box NOT acceptable) Marcy J Hall		2818 JUL -3	БПи, —
This Corporati (Purpose(s) of c	(Principal office address) (Current mailing address, if different) on is organized exclusively for charitable purposes as a not-for-profit corporation. corporation authorized in home state or country to be carried out in the state of Florida) eet address of Florida registered agent: (P.O. Box NOT acceptable) Marcy J Hall 695 Ala N #85		2818 JUL -3	6iliu
This Corporati (Purpose(s) of c	(Principal office address) (Current mailing address, if different) on is organized exclusively for charitable purposes as a not-for-profit corporation. corporation authorized in home state or country to be carried out in the state of Florida) cet address of Florida registered agent: (P.O. Box NOT acceptable) Marcy J Hall		2818 JUL	6ilia

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.

Marcy Hall	Digitally signed by Marcy Hall DN cn-Marcy Hall, o-Worldrice Alliance, ou, email-email-grownolforce is com, c=US Date 2018.05.23.13.07.36.04.00*
(Reg	gistered 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 SEE ATTACHED Chairman: Address: Vice Chairman: Address: Director: Address:___ Director: **B. OFFICERS** President: SEE ATTACHED Address:__ Vice President: Address:___ Secretary: Address: Treasurer: Address:______ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. KEITH LAWING PRESIDENT & CEO
(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 Attachment

Section 12: Names and addresses of officers and/or directors

A. Directors:

Chairman: Gabe Schlickua

Address: 300 W Douglas, Suite 850, Wichita, KS 67202

B. Officers:

President/CEO: Keith Lawing

Address: 300 W Douglas, Suite 850, Wichita, KS 67202

VP/Treasurer: Chad Pettera

Address: 300 W Douglas, Suite 850, Wichita, KS 67202

VP: Amanda Duncan

Address: 300 W Douglas, Suite 850, Wichita, KS 67202

VP: Katie Givens

Address: 300 W Douglas, Suite 850, Wichita, KS 67202

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STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity 1D Number: 3008547

Entity Name: THE WORKFORCE ALLIANCE OF SOUTH CENTRAL KANSAS, INC.

Entity Type: DOM:NOT FOR PROFIT CORPORATION

State of Organization: KS

Resident Agent: THE WORKFORCE ALLIANCE OF SOUTH CENTRAL KANSAS,

INC.

Registered Office: 300 W. DOUGLAS AVENUE SUITE 850, WICHITA, KS 67202

was filed in this office on April 23, 2001, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

OF 12 THE

In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of June 18, 2018

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 1061516 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/yalidate and enter the certificate ID number.