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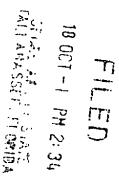
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T SCHROEDER

COVER LETTER

TO: Registration Section Division of Corporations									
CTIES	CCT	The North	iwest Minnesota Fou	ndation,	Incorporated				
SUBJ	ECT:_		Name of (Corpora	tion – must in	clude suffix			
Dear S	ir or M	adam:							
Affairs	s in Flo	rida", "Ce		ce", or '	'Certificate of	Status" and ch	ation to Conduct its seck are submitted to Florida.		
Please	return :	all corresp	ondence concernir	ig this n	natter to the fo	ollowing:			
			Nancy Vyskoc	il, Presid	lent				
				Name	of Person				
			The Northwes	t Minnes	sota Foundation	ı			
				Firm/	Company/				
			201 3rd St. N	W					
				A	ddress				
			Bemidji, MN	56601-	3111				
			Ci	ty/State	and Zip Code	;			
			micm@nwm	f.org					
		E-m	nail address: (to be	used for	r future annua	l report notifica	ntion)		
For fu	rther in	formation	concerning this ma	itter, ple	ease call:				
Mic	McCror	y - Develo	oment Officer	at	218	759-2057			
		Name (of Person		Area Code	Daytime Tel	ephone Number		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327				STREET/COURIER ADDR Registration Section Division of Corporations Clifton Building					
	Tallai	nassee, FI	. 32314			2661 Executive Center Circle Tallahassee, FL 32301			
Enclos	sed is a	check for	the following amo	unt:					
57 (0.00 Fil	ing Fee	□\$78.75 Filing I Certificate o			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:

(Current mailing address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) William Warinner	(Date of Incorporation) (Date of duration, if other than perpetual) N/A (Date first conducted affairs in Florida if prior to registration. See sections 617.1591 & 617.1502, F.S., to determine penalty liability 201 3rd St. NW Bemidji, MN 56601-3111 (Principal office address) (Current mailing address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	(Current mathing address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name: William Warinner (Date of duration, if other than perpetual) (Principal office address, if different) (Principal office address) (Current mathing address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	(11 name anava	ilable in Florida, enter alternate com	
(Date of Incorporation) (Date of Incorporation) (Date of duration, if other than perpetual) N/A (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty limit 201 3rd St. NW Bemidji, MN 56601-3111 (Principal office address) (Current mailing address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	(Date of Incorporation) (Date of duration, if other than perpetual) N/A (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability 201 3rd St. NW Bemidji, MN 56601-3111 (Principal office address) (Current mailing address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	(Date of Incorporation) (Date of duration, if other than perpetual) N/A (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability 201 3rd St. NW Bemidji, MN 56601-3111 (Principal office address) (Current mailing address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	Minnesota		₂ 41-1556013
(Date of Incorporation) (Date of Incorporation) (Date of duration, if other than perpetual) N/A (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty limited and St. NW Bemidji, MN 56601-3111 (Principal office address) (Current matting address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	(Date of Incorporation) (Date of duration, if other than perpetual) N/A (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability 201 3rd St. NW Bemidji, MN 56601-3111 (Principal office address) (Current mailing address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	(Date of Incorporation) (Date of duration, if other than perpetual) N/A (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability 201 3rd St. NW Bemidji, MN 56601-3111 (Principal office address) (Current maining address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	(State or cour	try under the law of which it is inco	porated) (FEI number, if applicable)
(Current mailing address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) William Warinner	(Current matting address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) William Warinner	(Current mailing address, if different) The Northwest Minnesota Foundation invests resources, facilitates collaboration, and promotes philanthropy to make the (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) William Warinner	04/17/1986		5
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Name:	Name:	Name:	The Nonhwes	·	or country to be carried out in the state of Florida)
Name:	Name:	Name:		Minnesota Foundation invests resourcerporation authorized in home state	or country to be carried out in the state of Florida)
Mice Address: Flores dela Playa 245 Hwy Ala Unit 403	Flores dela Playa 245 Hwy A1a Unit 403 Satellite Beach (City) Florida 32937-8530 (Zip Code)	Flores dela Playa 245 Hwy A1a Unit 403 Satellite Beach (City) (City) Florida 32937-8530 (Zip Code)		Minnesota Foundation invests resourcerporation authorized in home state	or country to be carried out in the state of Florida)
	Satellite Beach Florida 32937-8530 (Zip Code)	Satellite Beach Florida 32937-8530 (Zip Code)	Name and str	Minnesota Foundation invests reson corporation authorized in home state eet address of Florida registered a William Warinner	or country to be carried out in the state of Florida) agent: (P.O. Box NOT acceptable)
Satellite Beach Florida 32937-8530	(City) (Zip Code)	(City) (Zip Code)	Name and str Name:	Minnesota Foundation invests reson corporation authorized in home state eet address of Florida registered a William Warinner	or country to be carried out in the state of Florida) agent: (P.O. Box NOT acceptable)
(City) (Zip Code)	magazi. ω	$oldsymbol{ar{arphi}} oldsymbol{ar{arphi}} oldsymbol{ar{ar{arphi}}} oldsymbol{ar{ar{ar{arphi}}}} oldsymbol{ar{ar{ar{ar{ar{ar{ar{ar{ar{ar$	Name and str Name:	Minnesota Foundation invests reson corporation authorized in home state eet address of Florida registered a William Warinner	or country to be carried out in the state of Florida) agent: (P.O. Box NOT acceptable)
=	\mathcal{Z}^{ω} \mathcal{U}		Name and <u>str</u> Name:	Minnesota Foundation invests reson corporation authorized in home state eet address of Florida registered a William Warinner	or country to be carried out in the state of Florida) agent: (P.O. Box NOT acceptable)
0. Registered agent's acceptance: aying been named as registered agent and to accept service of process for the above stated corporation at the	aving been named as registered agent and to accept service of process for the above stated corporation at the p		Name and str Name: ffice Address: 0. Registered	Minnesota Foundation invests resort corporation authorized in home state eet address of Florida registered at William Warinner Flores dela Playa 245 Hwy Ala Ui Satellite Beach (City) agent's acceptance:	rices, facilitates collaboration, and promotes philanthropy to make the or country to be carried out in the state of Florida) rigent: (P.O. Box NOT acceptable) Plant 403 Florida 32937-8530 (Zip Code)
). Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the signated in this application. I hereby accept the appointment as registered agent and agree to act in this cap	aving heen named as registered agent and to accept service of process for the above stated corporation at the p signated in this application, I hereby accept the appointment as registered agent and agree to act in this capac rther agree to comply with the provisions of all statutes relative to the proper and complete performance of my	signated in this application. I hereby accept the appointment as registered agent and agree to act in this capa	Name and str Name: Tice Address: D. Registered aving been not signated in the	Minnesota Foundation invests resort corporation authorized in home state seet address of Florida registered at William Warinner Flores dela Playa 245 Hwy Ala Un Satellite Beach (City) agent's acceptance: and as registered agent and to do its application. I hereby accept the	rices, facilitates collaboration, and promotes philanthropy to make the or country to be carried out in the state of Florida) rigent: (P.O. Box NOT acceptable) Florida 32937-8530 (Zip Code) Cip Code) Cip Code Cip C

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:	Pete Haddeland			
Address:	03 North Main			
•	Mahnomen, MN 56557			
Vice Chair	Tom Anderson			
	6125 470th St.			
_	Clearbrook, MN 56634			
J. Director:	on Linnell			
_	15 South Main			
	Varren, MN 56762			
Director:	Cathy Forgit			
_	6790 State Hwy 102 SW	~~•		
	Fertile, MN 56540		13	
B. OFFI	ICERS	3.5	=======================================	1
President:	Nancy Vyskocil			;
Address:	01 3rd St. NW		2 2	
В	Bemidji, MN 56601-3111	<u> </u>	ယ	
Vice Presid	Karen White	_ 		
	01 3rd St. NW			
_	Bemidji, MN 56601-3111	_		
Secretary:	Kristin Eggerling			
	25 South 3rd St. Hallock, MN 56728-4129			
_	Leah Pigatti			
_	2502 Greenwood Trail Park Rapids, MN 56470-5067			
NOTE: 1	f necessary, you may attach an addendum to the application listing additional officers and	d/or dire	ectors.	
13. K	Com William			
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applic	cation)		-
Kare	n White, Vice-President			
• 1.	(Typed or printed name and capacity of person signing application)			_

NMF Board Members

Pete Haddeland, Chair (2T-2019)

First National Bank of Mahnomen PO Box 378 Mahnomen, MN 56557 (W) 218-935-5251 (H) 218-473-2302 (C) 701-866-1952

phaddeland@mahnomenbank.com

Spouse: Sandy Mahnomen County

Tom Anderson, Vice Chair (2T-2019)

16125 470th St Clearbrook, MN 56634 (H) 218-776-3718 (C) 218-308-1032 thomasa@gvtel.com Spouse: Corrinne Clearwater County

Kristin Eggerling, Secretary (2T-2020)

425 S 3rd St Hallock, MN 56728-4129 (H) 218-843-2813 (C) 218-988-2009 keggerling@gmail.com Spouse: Paul Blomquist Kittson County

Leah Pigatti, Treasurer (2T-2020)

22502 Greenwood Trl Park Rapids, MN 56470-5067 (C) 218-255-0197 leahpigatti@msn.com Spouse: Tim Pigatti **Hubbard County**

1T-year = end of 1st Term 2T-year = end of 2nd Term Jon Linnell (2T-2019)

North Region Health Alliance 115 South Main St. Suite 4 Warren, MN 56762 (W) 218-745-3242 ilinnell@northregionha.com Spouse: Patricia Marshall County

Cathy Forgit (2T-2020)

36790 State Hwy 102 SW Fertile, MN 56540 (H) 218-945-6331 (C) 218-280-5468 cjforgit@gvtel.com Spouse: Jerry Forgit Polk County

Fave Auchenpaugh (2T-2018)

11094 195th Ave NE Thief River Falls, MN 56701 (C) 218-681-3410 auchenpaugh@gmail.com Pennington County

Edia Ramstad (1T-2018)

Weave Got Maille 202 West Main Street Ada, MN 56510 (W) 218-309-7244 (C) 605-695-6791 edie@weavegotmaille.com Spouse: Glenn Norman County

Steven Anderson (1T-2018)

Anderson Law Offices, P.A. 253 Oak Road Warroad, MN 56763 (W) 218-386-1040 (H) 218-386-2606 (C) 218-469-0119 steven@andersonlawyers.net Spouse: Holli Roseau County

Michelle Paquin (1T-2020)

PO Box 884 Red Lake, MN 56671 (W) 218-679-1479 (H) 218-679-3179 (C) 218-766-4652 paguinmichelle@msn.com Beltrami County

Todd Beckel (1T-2020)

PO Box 658

Baudette, MN 56623 (W) 218-634-2600 (C) 218-766-5794 toddbeckel@mncable.net Spouse: April Lake of the Woods County

Committees

Executive Committee

Pete Haddeland - Chair Tom Anderson Kristin Eggerling Leah Pigatti

Governance Committee

Tom Anderson - Chair Cathy Forgit Kristin Eggerting Todd Beckel Pete Haddeland

EDP Review Committee

Jon Linnell

Michelle Paquin

Investments Committee

Leah Pigatti - Chair

Audit Committee

Tom Anderson

Leah Pigatti - Chair

Loan Review Committee

Edie Ramstad

Ad hoc - Strategic Planning Process Design

Pete Haddeland - Chair Tom Anderson Kristin Eggerling Leah Pigatti

Philanthropic Initiatives Committee

Cathy Forgit - Chair Steve Anderson Fave Auchenpaugh

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: The Northwest Minnesota Foundation

Date Filed: 04/17/1986

File Number: Z-750

Minnesota Statutes, Chapter: 317A

Home Jurisdiction: Minnesota

This certificate has been issued on: 08/01/2018

Oteve Pinn Steve Simon

Secretary of State State of Minnesota