Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

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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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FOREIGN PROFIT/NONPROFIT CORPORATION

The College for Financial Planning Inc.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | ١ |
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Corporate Filing Menu

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UNE 18 AT 8:07

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607, 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| | | | _ |
|-------------------------------------|---|--|-----------------|
| (If nume unavails | able in Florida, enter alternate corporate name | e adopted for the purpose of transacting business in Florida) | |
| 2. Arlzona | 3 | 86-0933523 | _ |
| | y under the law of which it is incorporated) | (FEI number, If applicable) | |
| 4 | | (Date of duration, if other than perpetual) | |
| (Date | of incorporation) | (Date of duration, if other than porpotual) | |
| 6. 01/01/2019 | | | |
| | | in Florida, if prior to registration) 1502, F.S., to determine panalty liability) | |
| 7 9000 E. Nichols | Avé., Contennial, CO 80112 | | _ |
| ··- | (Princ | ipal office address) | |
| 900 North Point | Plowy., Suite 250, Alpharetta, GA 30005 | | 9 |
| | (Current mail | ing address, if different) | |
| | _ | (i) | % ₩ ₩ |
| Name and street | t address of Florida registered agent: (P | .O. Box NOT acceptable) | |
| Name: | C T Corporation System | <u></u> | 9 A |
| Office Address: | 1200 South Pine Island Road | | χ <u>α</u> Δ |
| | Plamation | , Florida 33324 (Zip code) | |
| | (City) | (Zip code) | |
| | | | |

10. 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.

| 11. Names and business addresses of officers and/or directors: | | |
|--|---|---------------|
| A. DIRECTORS | | |
| Chairman: See exhibit A | | _ |
| Address: | | |
| | | _ |
| Vice Chairman: | | - |
| Address: | | _ |
| | | |
| Director: | | _ |
| Address: | | |
| | | - - |
| Director: | | _ |
| Aúdress: | | _ |
| | | |
| B. OFFICERS | 22.00 | - [|
| | T. S. 2 | 1 |
| President: | 25 27 | _ ₹ |
| Address: | <u> </u> | - |
| | | - |
| Vice President: | | - |
| Address: | | _ |
| | | _ |
| Sccretary: | | _ |
| Address: | | _ |
| Treasurer: | | _ |
| Address: | | - |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or | r directors. | |
| 12. Oaley Pomonis | · | - |
| Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the fare true and that he or she is aware that false information submitted in a document to the Department of a third degree felony as provided for in s.817.155, F.S. | acts stated herein of State constitutes | |
| 13. Ashley Pomonis Assistant Secretary | | - |
| (Typed or printed name and capacity of person signing application) | | |

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Exhibit A

#11- Directors & Officers

| Name | Title | Business Address |
|---------------------|--------------------------------|-----------------------------------|
| Andrew S. Rosen | Director | 1515 West Cypress Creek Rd., Fort |
| | | Lauderdale, Florida 33309 |
| Matthew C. Seelye | Director | 1515 West Cypress Creek Rd., Fort |
| • | | Lauderdale, Florida 33309 |
| Melissa L. Mack | Director | 750 Third Ave. |
| | | New York, New York 10017 |
| Andrew Temte | President, Kaplan Professional | 332 Front St. S. |
| | | La Crosse, WI 54601 |
| Kevin Corser | Vice President & Treasurer | 900 NorthPoint Pkwy. |
| | | Suite 250 |
| | | Alpharetta, GA 30005 |
| Gregory Marino | Chief Executive Officer, KHPE | 1515 West Cypress Creek Rd., Fort |
| • . | | Lauderdale, Florida 33309 |
| Lisa Gefon Sicilian | Chief Administrative Officer | 1515 West Cypress Creek Rd., Fort |
| | | tauderdale, Florida 33309 |
| Jerry Dervin | Vice President | 1515 West Cypress Creek Rd., Fort |
| • | | Lauderdale, Florida 33309 |
| Michael Peyer | Chlef Financial Officer | 332 Front St. S. |
| • | | La Crosse, WI 54601 |
| Daniel Muszalski | Vice President, Finance | 332 Front St. S. |
| | _ | La Crosse, WI 54601 |
| Dirk Pantone | President | 9000 E. Nichols Ave. |
| | | Centennial, CO 80112 |
| Jennifer Friske | Assistant Treasurer | 900 NorthPoint Pkwy. |
| | | Suite 250 |
| | | Alpharetta, GA 30005 |
| Ashley Pomonis | Assistant Secretary | 550 West Van Buren St. |
| · | | Sulte 600 |
| | | Chicago, IL 60607 |
| David Adams | Vice President, General | 550 West Van Buren St. |
| | Counsel & Secretary | Suite 600 |
| | | Chicago, IL 60607 |



STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

THE COLLEGE FOR FINANCIAL PLANNING, INC.

ACC file number: 08515695

was incorporated under the laws of the State of Arizona on 09/09/1998;

That all annual reports owed to date by said corporation have been filed or delivered for filing, and all annual filing fees owed to date have been paid; and

That, according to the records of the Arizona Corporation Commission, said corporation is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. I have hereunto set my hand, affixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date: 01/17/2019

Matthew Neubert, Interim Executive Director



