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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 770285 4311639
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 78.75

ORDER DATE : May 16, 2019
ORDER TIME : 3:04 PM
ORDER NO. : 770285-005
CUSTOMER NO: 4311639

FOREIGN FILINGS

NAME: INSPIRARE FOUNDATION, INC.

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XXXX QUALIFICATION (TYPE: NP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

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. INSPIRAKE FOUNDATION, 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. DELAWARE 3. _____
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. DECEMBER 19, 2018 5. PERPETUAL
 (Date of Incorporation) (Date of duration, if other than perpetual)

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

7. 2800 WILLIAMS ISLAND BOULEVARD, #804, AVENTURA, FLORIDA 33160
 (Principal office street address)

2800 WILLIAMS ISLAND BOULEVARD, #804, AVENTURA, FLORIDA 33160
 (Current mailing address, if different)

8. THE PURPOSE OF THE CORPORATION IS EXCLUSIVELY CHARITABLE, EDUCATIONAL, SCIENTIFIC, RELIGIOUS AND LITERARY WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED.
 (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: CORPORATION SERVICE COMPANY

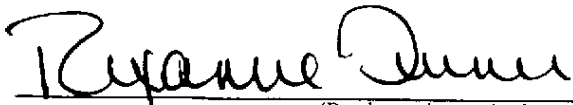
Office Address: 1201 HAYS STREET

TALLAHASSE, Florida 32301
 (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)

Roxanne Turner
 Asst. Vice President

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: BRIYIDT RIPAMONTI
 Vice Chairman Address: 15811 COLLINS AVENUE
 Director APT. 701
 President SUNNY ISLES BEACH, FL 33160
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: JACQUELINE RIPSTEIN
 Vice Chairman Address: 2800 WILLIAMS ISLAND BLVD.
 Director #804
 President AVENTURA, FL 33160
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: LOURDES MENDEZ
 Vice Chairman Address: 1300 S. MIAMI AVENUE
 Director APT. 1601
 President MIAMI, FL 33130
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: MIGUEL E. RODRIGUEZ
 Vice Chairman Address: 6799 COLLINS AVENUE
 Director UNIT 1706
 President MIAMI BEACH, FL 33141
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

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NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. Jacqueline Ripstein
 Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INSPIRARE FOUNDATION, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF MAY, A.D. 2019.


AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INSPIRARE FOUNDATION, INC." WAS INCORPORATED ON THE NINETEENTH DAY OF DECEMBER, A.D. 2018.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA




Jeffrey W. Bullock, Secretary of State

7201958 8300C

SR# 20194001440

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202837872

Date: 05-16-19