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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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FOREIGN PROFIT/NONPROFIT CORPORATION

Inside Track Impact, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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CONFIRM

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Corporate Filing Menu

Help

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. Inside Track Impact, 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. 84-3640492
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/6/2019 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

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

7. 121 SW Salmon Street, Suite 800, Portland, OR 97204
(Principal office street address)

(Current mailing address, if different)

8. Student Success Coaching
(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip Code)

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.

Michele Holden, Asst Sect

By: Michele Holden
(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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 TREASURY OF FLORIDA

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: Thomas C. Dawson
☐ Vice Chairman Address: 10 West Market Street
☒ Director Suite 1100
☐ President Indianapolis, IN 46204
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: A. Scott Fleming
☐ Vice Chairman Address: 2001 Pennsylvania Avenue
☒ Director Suite 1100
☐ President Washington, DC 20006
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Larry Lutz
☐ Vice Chairman Address: 10 West Market Street
☒ Director Suite 1100
☐ President Indianapolis, IN 46204
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Erin J. Roth
☐ Vice Chairman Address: 10 West Market Street
☒ Director Indianapolis, IN 46204
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Peter Wheelan
☐ Vice Chairman Address: 121 NW Salmon St.
☒ Director Suite 800
☐ President Portland, OR 97204
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Christina Clark
☐ Vice Chairman Address: 10 West Market Street
☐ Director Suite 1100
☐ President Indianapolis, IN 46204
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

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. Christina Clark
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Christina Clark, Secretary
 (Typed or printed name and capacity of person signing application)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "INSIDE TRACK IMPACT, 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 NINETEENTH DAY OF DECEMBER, A.D.
2019.

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



7690755 8300C

SR# 20198742036

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204256381

Date: 12-19-19