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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone : (954)208-0845 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	 	 	

FOREIGN PROFIT/NONPROFIT CORPORATION

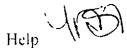
Bright Health Charitable Foundation

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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:

(Name of corpor	Charitable Foundation ation: must include the word "INCORPORATE ge as will clearly indicate that it is a corporation esent, "Company" or "Co." may not be used as a	incress at a parital netsell at allinetally i	1 12171 517 6191	like tained	
	d et la del la Completion des				
(If name unavai	th Charitable Foundation, Inc.	adopted for the purpose of transacting busing	ness in Flor	ida)	
2 Delaware	3. 19 5, tate of lucorporation)		<u> </u>	201	
(State or coun	try under the law of which it is incorporated)	(FEI number, if applicable)	آ ر		٠.
4. October 22, 20	195.	"This of duration if other than n	crochial	=	
(D	ate of lucorporation)	(Date of Edition, it office that p	ν. (Σ.	ا &	1
	octed offairs in Florida if prior to registration. See				;
•		sections 617,1301 & 617,1302, F.S, to desert	anne penuny	=	
7 219 N 2nd Stre	et #401, Minneapolis, MN 55401			<u>,</u>	-
* · <u> </u>	(Principal o	(Tice address)	<u>.</u>	ت .	
			77		
 	(Current mailing	eddress, if different)			
. To provide cha	aritable and educational activities				
(Purpose(s) of c	aritable and educational activities corporation authorized in home state or country	to be carried out in the state of Florida)		-	
	eet address of Florida registered agent: (P.C				
Name:	C T Corporation System 1200 South Pine Island Road				
Office Address:	1200 South Pine Island Road				
()[]]00 / [440 010)	Plantation,	Florida 33324			
	(City)	(Zip Code)			
Having been no designated in th	I agent's acceptance: amed as registered agent and to accept ser his application, I hereby accept the appoin o comply with the provisions of all statutes in familiar with and accept the obligations	relative to the proper and complete Po	rporation act in thi erformanc	at the pla 's cupacity ce of my	ce y. 1

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.

By: Stephanie Hencz Assistant Secretary
(Registered agent's signature)

CT Corporation System

Simeon Schindelman Airman:	
219 N 2mi St #401 Minneapolis, MN 55401	
dress:	
e Chairman:	
dress:	
Brian Reutner	7 <u>7</u>
219 N 2nd St \$401, Minneapolis, MN 55401 dress:	בני בני
Nick Christianson	.—; . ~~
219 N 2nd St #401, Minneapolis, MN 55401 ldress:	
	-
OFFICERS	
Simeon Schindelman 🗸	
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219 N 2nd St #401, Minneapolis, MN 55401 ice President: ddress: Brian Beutner ecretary: 219 N 2nd St #401, Minneapolis, MN 55401 ddress: Nick Christianson reasurer;	dditional officers and/or directors.

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BRIGHT HEALTH CHARITABLE FOUNDATION" 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 EIGHTH DAY OF JANUARY, A.D. 2020.

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

Authentication: 202148098

7666987 8300C

Date: 01-08-20