F2000	0000970
(Requestor's Name) (Address) (Address)	000340991760
(City/State/Zip/Phone #)	2020 FEB 21 AN 8: 45
Certified Copies Certificates of Status	
Office Use Only	

FEB 2 4 2020 M. SOLOMON CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 187684 7531940 AUTHORIZATION : Journal Cost LIMIT : \$ 70.00 ORDER DATE : February 20, 2020 ORDER TIME : 9:58 AM

ORDER NO. : 187684-005

CUSTOMER NO: 7531940

FOREIGN FILINGS

NAME: ATLANTA BRAVES FOUNDATION, INC

XXXX QUALIFICATION (TYPE: NP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

+

For

COVER LETTER

TO: **Registration Section Division of Corporations**

SUBJECT: <u>Atlanta Braves Foundation</u>, Inc. Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Jef	f D. Woodward
	Name of Person
Taylor	English Dumo LLD
	English Duma, LLP Firm/Company
	FiniteOmpany
1600 F	Parkwood Circle
	······································
	Suite 200
— <u> </u>	Address
Atlant	ta, Georgia 30339 /State and Zip Code
City	State and Zip Code
jwoodward@1	taylorenglish.com sed for future annual report notification)
E-mail address: (to be us	sed for future annual report notification)
further information concerning this matte	or plage call.
further mormation concerning this matte	er, please can.
Jeff D. Woodward Name of Person	at (<u>678</u>) <u>336-7202</u> Area Code Daytime Telephone Number
Name of Person	Area Code Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

☑ \$70.00 Filing Fee	□\$78.75 Filing Fee &	□\$78.75 Filing Fee &	□\$87.50 Filing Fee,
	Certificate of Status	Certified Copy	Certificate of Status &
			Certified Copy

Tallahassee, FL 32303

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. <u>Atlanta Braves Foundation Inc.</u> (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.)

Georgia		3.		071299	
(State or country	y under the law of which it is incor	porated)	(F	El number, il applicable))
April 8, 1993	3	5	Per	petual	
(Dat	3 e of Incorporation)		(Date)	of duration. if other than	perpetual)
N/A					
Date first conduct	ed affairs in Florida if prior to registr	ration. See sections	617.1501	& 617.1502, F.S. to deter	mine penalty lial
755 Batter	y Avenue SE, Atlanta, GA	30339			
100 04101		ncipal office street	address)		
_					
	(Curren	nt mailing address,	if differen	nt)	-
					- <u>,</u>
<u>Supporting m</u>	eaningful programs that m poration authorized in home state of	iurst in childre	n, ęduç	ation and neighbor	hoods
'urpose(s) of cor	poration authorized in home state of	or country to be car	rtied out i	n the state of Florida)	
ame and street	address of Florida registered ag	gent: (P.O. Box N	NOT acc	entable)	
		,		-1	_ ***
Name:	Corporation Service Co	mpany			
ice Address:	1201 Hays Street				
	Tallahassee	 [2]		22204	
			3/1/2		

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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.

Asst. VP (Registered agent's signature)

 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

Ø Chairman	Name: <u>Terence F. McGuirk</u>	□Chairman	Name: Derek Schiller
□Vice Chairman	Address: 755 Battery Avenue_SE	🗆 Vice Chairman	Address: 755 Battery Avenue SE
Director	Atlanta, GA 30339	Director	Atlanta, GA 30339
□President		President	
□Vice President		□Vice President	
Secretary		Secretary	□ Tre asurer
□Other:	Other:	Ø0ther: <u>CEO</u>	Other:
□ Chairman	Name: Michael Plant	Chairman	Name: James W. Moore
□Vice Chairman	Address: 755 Battery Avenue SE	⊡Vice Chairman	Address: 755 Battery Avenue SE
Director	Atlanta, GA 30339	Director	Atlanta, GA 30339
President		President	
□Vice President		🗇 Vice President	
	Treasurer	□Secretary	$\Box \text{Treasurer} \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $
Ø Other: Executive Vice President □ Other:		☑Other: <u>Executive \</u>	·
□Chairman	Name: Rubye Lucas	□ Chairman	Name: John Schuerholz
□Vice Chairman	Address: 755 Battery Avenue SE	□Vice Chairman	Address: 755 Battery Avenue SE
Director	Atlanta, GA 30339	Director	Atlanta, GA 30339
President		President	
□Vice President		□Vice President	
		Secretary	Treasurer
□Other:	Other:	DOther:	Other:

NOTE: <u>Important Notice:</u> 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.	See last page
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	Gregory J. Heller, Secretary (Typed or printed name and capacity of person signing application)

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

A. DIRECTORS

.

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□Chairman	Name: <u>Gregory</u> J. Heller	□Chairman	Name: Jill Robinson
□Vice Chairman	Address: 755 Battery Avenue SE	□Vice Chairman	Address:
Director	Atlanta, GA 30339	Director	Atlanta, GA 30339
□President		President	
□Vice President		□Vice President	
Secretary		Secretary	☐ Treasurer
ØOther: EVP, Ch	ief Legal Officer Other:	☑Other: <u>EVP,</u> C	CEO Other:
□Chairman	Name: Albert E. Rosenthaler	□Chairman	_{Name:} John ⊤. Kearns, III
□Vice Chairman	Address: 755 Battery Avenue SE	□Vice Chairman	Address: 755 Battery Avenue SE
Director	Atlanta, GA 30339	Director	Atlanta, GA 30339
President		President	
□Vice President		☑ Vice President	
	Treasurer		
⊠Other: Sr. Vice	e Resident 🗇 Other:	Other:	
			i i i i i i i i i i i i i i i i i i i
Chairman	Name: Tim P. Lenneman	Chairman	_{Name:} Pamela L. Coe
□Vice Chairman	Address: 755 Battery Avenue SE	🗍 Vice Chairman	Address: 755 Battery Avenue SE
Director	Atlanta, GA 30339	Director	Atlanta, GA 30339
President		□President	
Vice President		□Vice President	
Secretary	Treasurer	□Secretary	
DOther:	Other:	MOther: <u>Asst.S</u>	

NOTE: <u>Important Notice:</u> 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	See last page
_	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14.	Gregory J. Heller, Secretary
	(Typed or printed name and capacity of person signing application)

•	

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

A. DIRECTORS

ι,

□ Chai r man	Name:	Troyer	Chairman	Name:			
□Vice Chairman	Address:		□Vice Chairman	Address:			
Director	755 Battery A	ve SE	Director				
President	Atlanta, GA 30	0339	□ President				
□Vice President			□ Vice President	<u> </u>	·····		
Secretary		□Treasurer	Secretary		Treasurer		
■Other: <u>Asst. Sec</u>	cretary	□ Other:	Other:	- <u></u>	DOther:		
Chairman	Name:		□ Chairman	Name:		<u> </u>	
□Vice Chairman	Address:		□Vice Chairman	Address:		<u></u>	200
Director			Director				
DPresident		<u> </u>	[]President				
□Vice President			□Vice President			•	Ajh
		□Treasurer	Secretary		Treasurer	2.11	$\dot{\mathbf{\omega}}$
🗍 Other:		Other:	□Other:		DOther:	<u>.</u>	ۍ بې
□Chairman	Name:		□Chaiman	Name:			
□Vice Chairman	Address:		□Vice Chairman	Address:			
Director			Director				
President			President				
□Vice President			□Vice President				
Secretary		Treasurer	Secretary				
□Other:		□ Other:	∃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.

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

Gregory J Heller, Secretary 14.

(Typed or printed name and capacity of person signing application)

Control Number : K308680

STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

ATLANTA BRAVES FOUNDATION, INC.

a Domestic Nonprofit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number: 18618074Date Inc/Auth/Filed:04/08/1993Jurisdiction: GeorgiaPrint Date: 02/19/2020Form Number: 211



Brad Rafforgerg

Brad Raffensperger Secretary of State