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FOREIGN PROFIT/NONPROFIT CORPORATION

DNC Services Corporation

Certificate of Status	0
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T. 15 " . 17

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:

Democratic Nat	ional Committee, Inc.	ion.)		
	nilable in Florida, enter alternate corporate name adopted for the purpose of transacting bu	isiness in	Florida)	-
OC (State or con	3, 52-0958906 http under the law of which it is incorporated) (FEI number, if applicable	<u>,, </u>		_
	·			
September 21.	1972 5. (Date of duration, if other than	регрени	l)	-
Upon Qualific	ation			
(Date first cond	ucted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to dete	rmine pen	alty hab	ility.)
430 S Conitol	Street, SE Washington, DC 20003			
4,07 5 Calpiton	(Principal office street address)			_
	(Current mailing address, if different)			-
To conduct no				
	litical activity			
(Purpose(s) of	litical activity. corporation authorized in home state or country to be carried out in the state of Florida)	:	7.3 (db	-
(Purpose(s) of	corporation authorized in home state or country to be carried out in the state of Florida)		2股	_
(Purpose(s) of	litical activity. corporation authorized in home state or country to be carried out in the state of Florida) cet address of Florida registered agent: (P.O. Box NOT acceptable)		261 FG	- ••
(Purpose(s) of	corporation authorized in home state or country to be carried out in the state of Florida) eet address of Florida registered agent: (P.O. Box NOT acceptable)		261 FG 21	- - -
(Purpose(s) of . Name and <u>str</u> Name:	corporation authorized in home state or country to be carried out in the state of Florida) eet address of Florida registered agent: (P.O. Box NOT acceptable) C.T. Corporation System		21	
(Purpose(s) of . Name and str Name:	corporation authorized in home state or country to be carried out in the state of Florida) eet address of Florida registered agent: (P.O. Box NOT acceptable) C.T. Corporation System		2 P	- I have to a
(Purpose(s) of . Name and str Name:	corporation authorized in home state or country to be carried out in the state of Florida) eet address of Florida registered agent: (P.O. Box NOT acceptable) C.T. Corporation System		2 D	- I have been been
(Purpose(s) of). Name and <u>str</u> Name:	corporation authorized in home state or country to be carried out in the state of Florida) eet address of Florida registered agent: (P.O. Box NOT acceptable) C.T. Corporation System 12(0) South Pine Island Road Plantation Florida 33324		21 D 3 8	
(Purpose(s) of Name and str Name: Office Address:	corporation authorized in home state or country to be carried out in the state of Florida) cet address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System 12(0) South Pine Island Road Plantation (City) (City) (Zip Code) I agent's acceptance:		21 단중경기	
(Purpose(s) of Name and str Name: Office Address: O. Registered Laving been no	eet address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System 1200 South Pine Island Road Plantation (City) (City) (Zip Code) I agent's acceptance: and to accept service of process for the above stated consideration, I hereby accept the appointment as registered agent and agree to be comply with the provisions of all statutes relative to the proper and complete p	rporation	2 □ □ t≥ e3 □ n at the his cape	placity
(Purpose(s) of Name and str Name: Office Address: O. Registered Laving been in Larrhage to a core	eet address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System 1200 South Pine Island Road Plantation (Cny) A agent's acceptance: In agent agent and to accept service of process for the above stated considered application, I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper and complete point with and accept the obligations of my position as registered agent.	rporation	2 □ □ t≥ e3 □ n at the his cape	plac acity
(Purpose(s) of Name and str Name: Office Address: 10. Registered laving been no lesignated in the urther agree to and I am famili	eet address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System 1200 South Pine Island Road Plantation (City) (City) (Zip Code) I agent's acceptance: and to accept service of process for the above stated consideration, I hereby accept the appointment as registered agent and agree to be comply with the provisions of all statutes relative to the proper and complete p	rporation o act in t erformat	2 □ □ t≥ e3 □ n at the his cape	placity

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]:

2020-02-21 15 14:24 CST

A. DIRECTOR	RS			
□Chairman	Name: See attached	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		-
□President		□President		
□Vice President		□Vice President		
□ Secretary	□ Freasurer	□ Secretary		□Treasurer
Other:	Other:	Other:		Other:
□Chairman	Name:	□Chairman	Name.	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President	-	
□Vice President		□Vice President	_	
□ Secretary	□Treasurer	□ Secretary		□Treasurer
□Other:	Other:	□ Other:		Other:
⊟Chairman	Name:	□Chairman	Name.	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□ Secretary	⊠Treasurer	□Secretary		□Treasurer
□Other:	Other:	□ Other:		☐ Other:
Non-indexed indi	nt Notice: Use an attachment to report more the widuals may be added to the index when filing	your Florida Department	of State Anam	al Report form.
13.	(Signature of Chairman, Vice Chairman, or a	my officer listed in number	12 of the app	lication)
14. Rachana D	esai Martin, Chief Operating Officer (Typed or printed name and capacity			

▼ HELLOSIGN

Audit Trail

TITLE	Florida revised form
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Document History

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SIGNED	02 / 21 / 2020 11:40:48 UTC-5	Signed by Rachana Desai Martin (desaimartinr@dnc.org) IP: 206.169.137.201
COMPLETED	02 / 21 / 2020 11:40:48 UTC-5	The document has been completed.

Attachment: Application by Foreign Not for Profit Corporation for Authorization to Conduct Its Affairs in Florida -**DNC Services Corporation**

Names and Usual Business Address of Officers:

Name/Title	<u>Address</u>
Thomas Edward Perez, President	430 S Capitol Street, SE, Washington, DC 20003
Karen Carter Peterson, Vice President	430 S Capitol Street, SE, Washington, DC 20003
Maria Elena Durazo, Vice President	430 S Capitol Street, SE, Washington, DC 20003
Grace Meng, Vice President	430 S Capitol Street, SE, Washington, DC 20003
Michael Alexander Blake, Vice President	430 S Capitol Street, SE, Washington, DC 20003
Kenneth Martin, Vice President	430 S Capitol Street, SE, Washington, DC 20003
Jason Rae, Secretary	430 S Capitol Street, SE, Washington, DC 20003
William Derrough, Treasurer	430 S Capitol Street, SE, Washington, DC 20003
Christopher Korge, National Finance Chair	430 S Capitol Street, SE. Washington, DC 20003
Seema Nanda, Chief Executive Officer	430 S Capitol Street, SE, Washington, DC 20003
Joe Smolskis, Chief Financial Officer & Assistant Treasurer	430 S Capitol Street, SE, Washington, DC 20003
Rachana Desai Martin, Chief Operating Officer	430 S Capitol Street, SE, Washington, DC 20003

Names and Usual Business Address of Directors:

Name	<u>Address</u>
Thomas Edward Perez	430 S Capitol Street, SE, Washington, DC 20003
Karen Carter Peterson	430 S Capitol Street, SE, Washington, DC 20003
Maria Elena Durazo	430 S Capitol Street, SE, Washington, DC 20003
Grace Meng	430 S Capitol Street, SE, Washington, DC 20003
Michael Alexander Blake	430 S Capitol Street, SE, Washington, DC 20003
Kenneth Martin	430 S Capitol Street, SE, Washington, DC 20003
Jason Rae	430 S Capitol Street, SE, Washington, DC 20003
William Derrough	430 S Capitol Street, SE, Washington, DC 20003
Christopher Korge	430 S Capitol Street, SE, Washington, DC 20003

Initial File #: 722496 Entity Type: Non-Profit Corporation

GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS CORPORATIONS DIVISION



CERTIFICATE

THIS IS TO CERTIFY that all applicable provisions of the District of Columbia Business Organizations Code (Title 29) have been complied with and accordingly, this CERTIFICATE OF GOOD STANDING is hereby issued to

DNC SERVICES CORPORATION

WE FURTHER CERTIFY that the domestic filing entity is formed under the law of the District on 9/21/1972; that all fees, and penalties owed to the District for entity filings collected through the Mayor have been paid and Payment is reflected in the records of the Mayor; The entity's most recent biennial report required by § 29-102.11 has been delivered for filing to the Mayor; and the entity has not been dissolved. This office does not have any information about the entity's business practices and financial standing and this certificate shall not be construed as the entity's

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of 2/11/2020 5:54 PM



Muriel Bowser Mayor

Tracking #: pkSiKuVX

Business and Professional Licensing Administration

Posef Gi. Giasimov

JOSEF G. GASIMOV Acting Superintendent of Corporations Corporations Division