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### **COVER LETTER**

TO:	Registration Section Division of Corporations								
SUBJ	ECT: Accreditation International, Nonprofit Corporation								
30130	Name of Corporation – must include suffix								
Dear S	ir or Madam:								
Affair	iclosed "Application by Foreign Not for Profit Corporation for Authorization to Concessin Florida", "Certificate of Existence", or "Certificate of Status" and check are submer the above referenced not for profit corporation to conduct its affairs in Florida.								
Please	return all correspondence concerning this matter to the following:								
	Jesse T. Haines	202							
	Name of Person								
	Accreditation International	ω ····································							
	Firm/Company	0 .							
	33838 Pacific HWY S	2020 JUN 30 PM 4: 10							
	Suite B102	5							
	Address								
	Federal Way, WA 98003								
	City/State and Zip Code								
	corporate@aiaccredits.org								
	E-mail address: (to be used for future annual report notification)								
For fu	rther information concerning this matter, please call:								
Jamie	Cheesman 253 874-2958 at ( )								
	Name of Person Area Code Daytime Telephone Nui	nber							
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 8Tallahassee, FL 32303	Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810							
Please	Certificate of Status Certified Copy Certi	) Filing Fee. ificate of Status & ified Copy							

### 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:

	International, Nonprofit Corp					_
(Name of corpo import in langua in the name at p	ration: must include the word age as will clearly indicate the bresent. "Company" or "Co." i	I"INCORPORAT at it is a corporation may not be used as	ED" or "CORPORAT on instead of a natural s a corporate suffix by	ION" or words or abbr person or partnership i a nonprofit corporatio	eviations of like f not so contain n.)	ed
<u></u>	ailable in Florida, enter altern		a adopted for the num	oce of transacting busi	ness in Florida'	<del>-</del>
(If name unava	allable in Florida, enter altern	iate corporate nam	e adopted for the purp	ose of transacting our	ness in Florida,	,
9 Washington S	State, USA	3	27-1275840			_
(State or cour	State, USA ntry under the law of which it	t is incorporated)	(FEI)	number, if applicable)		
41/23/2009	Date of Incorporation)	5	Perpetual			<b></b>
6. No	lucted affairs in Florida if prior				702	<del></del> . \
(Date first cond	lucted affairs in Florida if prior	to registration. See	sections 617.1501 &	617.1502, F.S. to detern	nine penaliy hab	alitye),
7 1800 Marden 1	Road, Apopka, FL 32703				نشت دی	
··		(Principal offi	ce <u>street</u> address)		- 0	
33838 Pacific	HWY S, Suite B102 Federal	Way WA 98003				
- Togod Facation	Tivi otomo moz rodem	(Current mailing	address, if different)	<u></u>	<del></del>	-
						5
6 Private School	l accrediting and consulting.				ン	
8. (Purpose(s) of	l accrediting and consulting. corporation authorized in hor	me state or country	to be carried out in the	ne state of Florida)		_
	11 CP: 11 :		D. D NOT accept	ahla)		
9. Name and str	reet address of Florida regi	stered agent: (17.)	). Вох <u>мот</u> ассері	autej		
Name:	Jesse T. Haines					
	1800 Marden Road					
Office Address.	Apopka	-	, Florida <u>32703</u>			
	(City)		, riorida	(Zip Code)		
	```					
10. Registered	d agent's acceptance:	and to account com	ning of process for	the above stated core	poration at the	e place
desionated in tl	amed as registered agent a his application, I hereby a	ccent the appoin	imeni as regisierea	ageni una agree io c	асын талысар	acus. I
further agree to	o comply with the provisio iar with and accept the ob	ns of all statutes	relative to the proj	ier ana compiete per	formance of i	my duties
ana ramjama	iui wiin unu uccepi ine oo	ngunons oy my p	wanton na regimere	u ugomi		
		$7 \cdot 1$	٢			
		lessix (a)	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			
		(Registered	agent's signature)			
11. Attached is	s a certificate of existence of	duly authenticate	d, not more than 90	days prior to deliver	y of this appli	cation to
the Departi	ment of State, by the Secre	itominof State or c	aber official having	custody of comporate	e records in the	2
jurisdiction	rander the raw or whith h	was every Discourse				

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]: A. DIRECTORS Stephen Baker □ Chairman Name: \_\_\_\_\_ Name: ☐ Chairman 7518 Camden Harbor Drive ☐ Vice Chairman ☐ Vice Chairman Address: Address: \_\_\_\_\_\_ Bradenton, FL 34212 ☐ Director Director President □President ☐ Vice President □ Vice President □ Secretary □ Treasurer □ Secretary □ Treasurer □Other: \_\_\_ □Other:\_\_\_\_\_ □Other: \_\_\_\_\_ Other: Jesse T. Haines Name: \_\_ □Chairman □Chairman Address: \_\_\_\_\_ Address: ☐ Vice Chairman □ Vice Chairman Box 3, 1st Floor Director ■ Director Brussels 1000, Belgium □President □President ☐ Vice President ☐ Vice President Treasurer □ Secretary □ Secretary ☐Treasurer □Other:\_\_\_\_ □Other: \_\_\_\_\_ Other:\_\_\_\_ Mark Younghans □ Chairman □Chairman 29 Victoria Road □ Vice Chairman Address: ☐ Vice Chairman Address: Jacksonville NC 28546 □ Director ■Director □President ☐ President □ Vice President ☐ Vice President □Treasurer □ Secretary □ Treasurer □ Secretary 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. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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

Jesse T. Haines

# The State of Washington

Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

### CERTIFICATE OF EXISTENCE

OF

#### ACCREDITATION INTERNATIONAL

2020 JUN 30 PH 14:

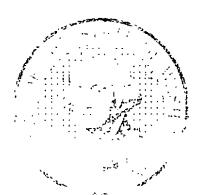
I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 11/23/2009.

1 FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 06/18/2020 UBI Number: 602 972 447



a. Construction of the discount o

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