# F2000005124

(Requestor's Name)		
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//	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Dx	ocument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 30, 2020

PATTY NAROZNY PO BOX 1425 SARASOTA, FL 34230

SUBJECT: INSTITUTE FOR THE ARTS & EDUCATION, INC.

Ref. Number: W20000125877

We have received your document for INSTITUTE FOR THE ARTS & EDUCATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$561.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott Document Specialist II

Letter Number: 920A00021710

11-9-20 lm on In

RECEIVED

#### **COVER LETTER**

TO:	_	stration Section sion of Corporations	
CUDI	row.	Institute for the Arts & Education, Inc.	
SUBJ	ECI:_	Name of Corporation – must include suffix	
Dear S	ir or Ma	ladam:	
Affairs	in Flori	"Application by Foreign Not for Profit Corporation for Authorization to Corporation, "Certificate of Existence", or "Certificate of Status" and check are subpove referenced not for profit corporation to conduct its affairs in Florida.	mitted to
Please	return a	all correspondence concerning this matter to the following:	2378 NOV 12
		Patty Narozny	. 12
		Name of Person	79
		Institute for the Arts & Education, Inc.	64:7 Hd
		Firm/Company	•
		PO Box 1425	
		Address Sarasota, FL 34230	
		City/State and Zip Code	
		patty@artsandeducationinc.org	
		E-mail address: (to be used for future annual report notification)	
For fur	rther info	formation concerning this matter, please call:	
Patty	y Narozn		
		Name of Person Area Code Daytime Telephone Nu	imber
	Regist Divisi P.O. E	ng Address: stration Section sion of Corporations Box 6327 ahassee, FL 32314  Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	810
Please		Certificate of Status Certified Copy Cer	0 Filing Fee. tificate of Status & tified Copy

## APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

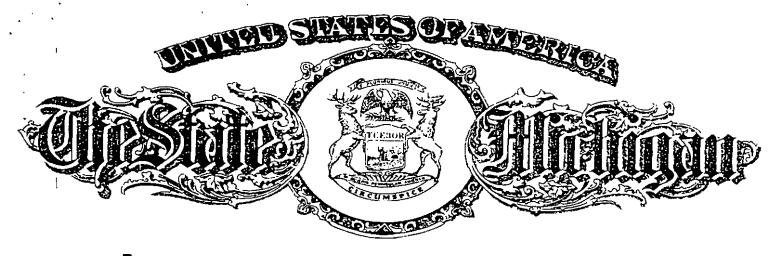
IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

Instituta for t	na Arte & Education Inc				
1 .	ne Arts & Education, Inc.	VCONDOR ATTI	N. JICOBBOB ATION	791	
(Name of corpor	ation: must include the word "I? ge as will clearly indicate that it esent. "Company" or "Co." may	NCORPORATEI	D" or "CORPORATION instead of a natural ner	N" or words or abbro	viations of like
in the name at pr	esent. "Company" or "Co." may	not be used as a	corporate suffix by a n	onprofit corporation	i.)
•					
(If name unava	ilable in Florida, enter alternate	corporate name a	idopted for the purpose	of transacting busin	ess in Florida)
					<b>نہ</b>
2. Michigan	try under the law of which it is	3	26-3469925	, <u> </u>	<u> </u>
(State or coun	try under the law of which it is	incorporated)	(FEI num	ber, if applicable)	
4. January 31, 2	009	5			9V
(D	try under the law of which it is a 1009 ate of Incorporation)	5. <b>_</b>	(Date of dura	tion, if other than pe	rpetual)
Manager 20	10				
6. (Die Generalie	ected affairs in Florida if prior to r			1502 1:6	-0 
(Date first condu	icted attairs in Fforida it prior to r	registration. See se	ctions 017.1301 & 017.	1302, F.S. to aeterm	ne penatty tiaojitty.)
7. 2497 Ripple	Way, White Lake, MI 48383			첫	٠ ۲: -
/		(Principal office	street address)	- 1	<del></del>
				,	
PO Box 142:	5, Sarasota, FL 34230				
	(C	urrent mailing ac	Idress, if different)		<u> </u>
		•			
8. High Quality	Juried fine art & fine craft show orporation authorized in home s	vs; focus is visua	arts, community enricl	ment, cultural dive	rsity and fosteri
(Purpose(s) of c	orporation authorized in home s	state or country to	be carried out in the st	ate of Florida)	_
9. Name and <u>stre</u>	<u>et address</u> of Florida register	red agent: (P.O.	Box NOT acceptable	2)	
Name:	Patty Narozny				
•	6416 Auburn Ava		<del></del> -		
Office Address:	6416 Auburn Ave				
	Bradenton		, Florida <u>34207</u> (Z		
	(City)		(Z	ip Code)	
	•			•	
10. Registered	agent's acceptance:				
Having been na	med as registered agent and	to accept service	e of process for the d	above stated corpo	oration at the place
designated in th	is application, I hereby accep	pt the appointn	ent as registered age	ent and agree to a	et in this capacity. J
further agree to	is application, I hereby accept comply with the provisions of ar with and accept the obliga	of all statutes re	lative to the proper o	und complete perf	ormance of my dutie
unu i am jamuu	ir wiin ana accept the omiga	mons of my pos	mion as registerea ag	şenı.	
	$\cap$				
	1/ h == a	10 /			
	Maron				
	<del></del>	(Registered ag	gent's signature)	-	<del></del>

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]:

☐Chairman	Patty Narozny Name:	Chairman		Name:		
□Vice Chairman	6416 Auburn Ave Address:	□Vice Chairman		Address: 2497 Ripple Way		
□Director	Bradenton, Fl. 34207	□Director	White Lake, MI 48383			
President		□President				
□Vice President		■Vice President		297) N		
□ Secretary	Treasurer	□Secretary		☐ Treasure		
□Other:	Other:	□Other:		Other:		
□ Chairman	Donald Chadwick	□Chairman	Name:	P		
□ Vice Chairman	Address: 344 S Broadway	□Vice Chairman		:		
Director	Lake Orion, MI 48362	□Director				
□President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	□ Secretary		□Treasurer		
Other:	☐ Other:	□Other:		□Other:		
□ Chairman	Name:	□Chairman	Name:			
□Vice Chairman		□Vice Chaiπnan		:		
□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 that viduals may be added to the index when filing (Signature of Chairman, Vice Chairman or an irozny, President for Institute for the Arts & Ed (Typed or printed name and capacity	your Florida Department of Hands of Han	of State A  12 of the	innual Report form.		



# Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

#### INSTITUTE FOR THE ARTS AND EDUCATION, INC.

was validly Incorporated on September 24 , 2008 as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1982 PA 162 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 2nd day of October, 2020.

Linda Clegg, Interim Director

Corporations, Securities & Commercial Licensing Bureau