

F21000004053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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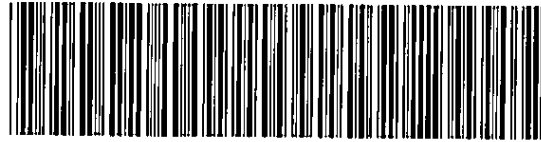
(Business Entity Name)

(Document Number)

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10:50 AM

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 07/19/2021

Acc#I20160000072

en: c DW

Name:	Brown University
Document #:	
Order #:	13085117

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
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Amount: \$ 78.75

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Brown University 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:

Shannon Covill, Senior Paralegal

Name of Person

Brown University

Firm/Company

350 Eddy Street, Box 1913

Address

Providence, RI 02903-1913

City/State and Zip Code

statecommunications@wolterskluwer.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shannon Covill, Senior Paralegal

Name of Person

at (401)

Area Code

863-3593

Daytime Telephone Number

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 & Certificate of Status ☒ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified 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:

1. Brown University Inc.

(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.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Rhode Island 3. (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02-01-1764 5. (Date of Incorporation) (Date of duration, if other than perpetual)

6. upon filing
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 1 PROSPECT STREET PROVIDENCE, RI 02912-1913
(Principal office street address)

350 Eddy Street, Box 1913, Providence, RI 02903-1913
(Current mailing address, if different)

8. Colleges, Universities, and Professional Schools
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

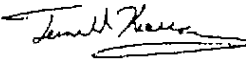
Plantation, Florida 33324
(City) (Zip Code)

2021 JUL 19 AM 9:01

10. Registered agent's acceptance:

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.

C T Corporation System

By: 
(Registered agent's signature)

Ternell Kearney Assistant Secretary

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]:

A. DIRECTORS

☐ Chairman Name: CHRISTINA PAXSON
☐ Vice Chairman Address: 1 PROSPECT STREET
☐ Director PROVIDENCE, RI 02912-1913
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: THERESIA GOUW
☐ Vice Chairman Address: 1 PROSPECT STREET
☐ Director PROVIDENCE, RI 02912-1913
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

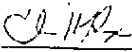
☐ Chairman Name: RICHARD A. FRIEDMAN
☐ Vice Chairman Address: 1 PROSPECT STREET
☐ Director PROVIDENCE, RI 02912-1913
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: SAMUEL M. MENCOFF
☐ Vice Chairman Address: 1 PROSPECT STREET
☐ Director PROVIDENCE, RI 02912-1913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Chancellor ☐ Other: _____

☐ Chairman Name: ALISON S. RESSLER
☐ Vice Chairman Address: 1 PROSPECT STREET
☐ Director PROVIDENCE, RI 02912-1913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Vice Chancellor ☐ Other: _____

☐ Chairman Name: CHARLES H. GIANCARIO
☐ Vice Chairman Address: 1 PROSPECT STREET
☒ Director PROVIDENCE, RI 02912-1913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ 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)

14. Christina Paxson, President
(Typed or printed name and capacity of person signing application)



State of Rhode Island
Department of State | Office of the Secretary of State
Nellie M. Gorbea, Secretary of State

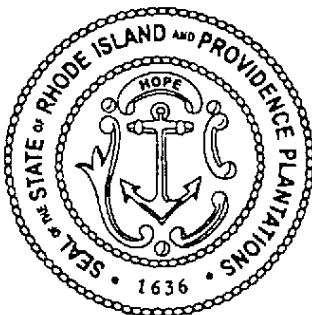
CERTIFICATE OF GOOD STANDING

I, Nellie M. Gorbea, Secretary of State and custodian of the seal and corporate records of the State of Rhode Island, hereby certify that:

Brown University

is a Rhode Island Non-Profit Corporation organized on **February 01, 1764**. I further certify that revocation proceedings are not pending; articles of dissolution have not been filed; all annual reports are of record and the corporation is active and in good standing with this office.

This certificate is not to be considered as a notice of the corporation's financial condition or business practices; such information is not available from this office.



SIGNED and SEALED on

June 23, 2021

Secretary of State

Certificate Number: 21060098880

Verify this Certificate at: <http://business.sos.ri.gov/CorpWeb/Certificates/Verify.aspx>

Processed by: dantonelli