# F21000004460

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#### **COVER LETTER**

TO:	egistration Section ivision of Corporations						
SHRI	ECT: First Place AZ						
5017	Name of Corporation – must include suffix						
Dear S	Sir or Madam:						
Affair	nclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its s in Florida". "Certificate of Existence", or "Certificate of Status" and check are submitted to the above referenced not for profit corporation to conduct its affairs in Florida.						
Please	return all correspondence concerning this matter to the following:						
	Denise D. Resnik						
	Name of Person						
	First Place AZ						
	Firm/Company						
	717 E. Maryland Ave., Suite 110						
	Address						
	Phoenix, AZ 85014						
	City/State and Zip Code						
	accounting@firstplaceaz.org						
	E-mail address: (to be used for future annual report notification)						
For fu	rther information concerning this matter, please call:						
Willia	am C. Heimerdinger 602 464-6602 at ( )						
	Name of Person Area Code Daytime Telephone Number						
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303						
Please	sed is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE  0.00 Filing Fee						

## 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:

(If name unav	vailable in Florida, enter alternate o	corporate name adopted for the purpose of transacting by	isiness in Florida)
Arizona		3. 46-1722227 (FEI number, if applicable	
(State or cou			
November 29	, 2012	5. (Date of duration, if other than	
(	Date of Incorporation)	(Date of duration, if other than	perpetual)
September 22	2, 2020		
(Date first cond	ducted affairs in Florida if prior to re	gistration. See sections 617, 1501 & 617, 1502, F.S. to dete	rmine penalty liability.)
717 E. Maryla	and Ave., Phoenix, AZ 85014		
<u> </u>		(Principal office <u>street</u> address)	
-		irrent mailing address, if different)	
	•	<b>3</b> ,	
Provide consu	lting services and license intellects	ual property to Jackson County	202
Provide consu	lting services and license intellects	ual property to Jackson County	2021 }
Provide consu (Purpose(s) of	lting services and license intellects corporation authorized in home sta	ual property to Jackson County nte or country to be carried out in the state of Florida)	20211/20
		nal property to Jackson County ate or country to be carried out in the state of Florida) d agent: (P.O. Box <u>NOT</u> acceptable)	2021 157 Y
Name and st	eet address of Florida registere	d agent: (P.O. Box <u>NOT</u> acceptable)	20211/274 1.9
Name and st	eet address of Florida registere	d agent: (P.O. Box <u>NOT</u> acceptable)	2021 K/YY 1.9 PI
Name and st	C T Corporation System  1200 South Pine Island Road	d agent: (P.O. Box <u>NOT</u> acceptable)	- 19
Name and st	C T Corporation System  1200 South Pine Island Road	d agent: (P.O. Box <u>NOT</u> acceptable)	- 19
Name and st	C T Corporation System  1200 South Pine Island Road	d agent: (P.O. Box <u>NOT</u> acceptable)	- PH -
Name and <u>str</u> Name: ffice Address:	C T Corporation System  1200 South Pine Island Road  Plantation  (City)	d agent: (P.O. Box <u>NOT</u> acceptable)	- 19
Name and str Name: flice Address:	CT Corporation System  1200 South Pine Island Road  Plantation  (City)  Lagent's acceptance:	d agent: (P.O. Box <u>NOT</u> acceptable)  Florida 33324	PH 1:56
Name and str Name: flice Address: 0. Registered	C T Corporation System  1200 South Pine Island Road  Plantation  (City)  I agent's acceptance:  med as registered agent and to	. Florida 33324  (Zip Code)  accept service of process for the above stated con	Poration at the place
Name and str Name: ffice Address: 0. Registered aving been no exignated in the	eet address of Florida registere C T Corporation System 1200 South Pine Island Road Plantation (City) Lagent's acceptance: uned as registered agent and to is application, I hereby accept	d agent: (P.O. Box <u>NOT</u> acceptable)  Florida \frac{33324}{(Zip Code)}  or accept service of process for the above stated continuous appointment as registered agent and agree to fall statutes relative to the proper and complete ne	Poration at the place act in this capacity. I
Name and str Name: ffice Address: 0. Registered aving been no exignated in the	eet address of Florida registere C T Corporation System 1200 South Pine Island Road Plantation (City) Lagent's acceptance: uned as registered agent and to is application, I hereby accept	. Florida 33324  Florida (Zip Code)  accept service of process for the above stated contact the appointment as registered agent and agree to	Poration at the place act in this capacity. I
Name and str Name: ffice Address: 0. Registered aving been no exignated in the	eet address of Florida registere C T Corporation System 1200 South Pine Island Road Plantation (City) Lagent's acceptance: uned as registered agent and to is application, I hereby accept	d agent: (P.O. Box NOT acceptable)  Florida 33324	Poration at the place act in this capacity. I

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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 Sccretary 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. DIRECTOR			
<b>■</b> Chairman	Name: Howard Sobelman	□Chairman	Name:
□Vice Chairman	Address: 217 E. Maryland Ave. Suite 110	■Vice Chairman	Address:Address:
□Director	Phoenix, AZ 85014	□Director	Phoenix, AZ 85014
□President		□Presidem	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other:	Other:	□Other:	Other:
☐ Chairman	Jack Henry Name:	□ Chairman	Kathy Hancock
□Vice Chairman	Address: 717 E. Maryland Ave, Suite 110	□Vice Chairman	Address: Address:
□Director	Phoenix, AZ 85014	□Director	Phoenix, AZ 85014
□President	,	□President	
□Vice President		□Vice President	
Secretary	<b>■</b> Treasurer	<b>■</b> Secretary	□Treasurer
□Other:	☐ Other:	□Other:	Other:
☐ Chairman	Denise Resnik Name:	□ Chairman	Sara Dial Name:
□ Vice Chairman	Address: 717 E. Maryland Ave, Suite 110	□ Vice Chairman	717 E. Maryland Ave, Suite 110
Director	Phoenix, AZ 85014	■Director	Phoenix, AZ 85014
President		□President	_
□Vice President		□ Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□ Treasurer
□Other:	Other:	□Othert	Other:
Non-indexed indiv	t Notice: Use an attachment to report more than viduals may be added to the index when filing yo (Signature of Chairman, Vice Chairman, or any elman, Board Chair  (Typed or printed name and capacity of	our Florida Department of ficer listed in number	of State Annual Report form.  12 of the application)

# Additional primary officers and/or directors

### Attachment

□ Chairman  □ Vice Chairman  □ Director  □ President  □ Vice President  □ Secretary  □ Other:	□Treasurer	☐ Chairman ☐ Vice Chairman ☐ Director ☐ President ☐ Vice President ☐ Secretary ☐ Other:	Tom Ortega Name:  717 E. Maryland Ave, Suite 110  Phoenix, AZ 85014  □ Treasurer □ Other: □
□Chairman □Vice Chairman □Director □President □Vice President	Name: Tess Burleson  Address: 717 E. Maryland Ave, Suite 110  Phoenix, AZ 85014	□Chairman □Vice Chairman ■Director □President □Vice President	Name:  Michael Trailor  717 E. Maryland Ave, Suite 110  Address:  Phoenix, AZ 85014
□Secretary □Other:	□Treasurer	□Secretary □Other:	□Treasurer
□ Chairman □ Vice Chairman □ Director □ President □ Vice President	Name: Susan Smith  717 E. Maryland Ave, Suite 110  Address: Phoenix, AZ 85014	□Chairman □Vice Chairman □Director □President □Vice President	Name: Amy Pawlowski  Address: 717 E. Maryland Ave, Suite 110  Phoenix, AZ 85014
☐ Secretary  ☐ Other: ☐ Chairman	Name: Bruce Schwartz 717 E. Maryland Ave. Suite 110	□Secretary □Other: □Chairman	Name:
□ Vice Chairman □ Director □ President □ Vice President	Address:Phoenix, AZ 85014	□ Vice Chairman □ Director □ President □ Vice President	Address:
□Secretary □Other:	□ Treasurer	☐Secretary ☐Other:	□ Treasurer









# Office of the CORPORATION COMMISSION

#### CERTIFICATE OF GOOD STANDING

1, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

#### FIRST PLACE AZ

ACC file number: 18113878

was incorporated under the laws of the State of Arizona on 12/17/2012;

That all annual reports owed to date by said corporation have been filed or delivered for filing, and all annual filing fees owed to date have been paid; and

That, according to the records of the Arizona Corporation Commission, said corporation is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. Thave hereunto set my hand, affixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date: 04/23/2021

Matthew Neubert, Executive Director



