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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

ddress:			
d	dress:	dress:	dress:

FLORIDA PROFIT/NON PROFIT CORPORATION NDC ECONOMIC DEVELOPMENT LENDING, INC.

Certificate of Status	0
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COVER LETTER

	egistration Section Division of Corporations			
	T: NDC Economic Development Lending, Inc.			
SOBJEC	Name of Corporation -	- must include suffix		
Dear Sir o	or Madam:			
Affairs in	osed "Application by Foreign Not for Profit Co Florida", "Certificate of Existence", or "Certi the above referenced not for profit corporation to	ficate of Status" and ch	eck are submitted to	
Please ret	turn all correspondence concerning this matter	to the following:		
	Gertrude Scriven			
	Name of Pe	erson		
	NDC Economic Development Lending, Inc	•		
	Firm/Com	pany		
	1111 Superior Avenue East			
	Suite 1114			
	Addres	S		
	Cleveland, OH 44114			
	City/State and 2	Zip Code		
	gscriven@ndconline.org			
	E-mail address: (to be used for futu	re annual report notifica	ation)	
For furthe	er information concerning this matter, please c	all:		
Gertrude	Scriven 212)		
	Name of Person Are	a Code Daytime Te	ephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Please mak	is a check for the following amount: se check payable to: FLORIDA DEPARTMENT Filing Fee \$\Bigsiz\$ \$\$\\$58.75\$ Filing Fee & \$\Bigsiz\$ Certificate of Status	OF STATE \$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:

MIMAR.			·
	to Development Lending, Inc.	ATED" or "CORPORATION" or words or ab	
and the contract of the contra	BEC as will clearly indicate that it is a cornor	ration instead of a natural person or partnershing as a corporate suffix by a nonprofit corporate.	n if not co contained
NDC EDL	and the second s	so as a corporate surinx by a nonprofit corpora	ion.)
(If name unava	illable in Florida, enter alternate corporate n	name adopted for the purpose of transacting bu	isiness in Florida)
Delaware			
1State of sour	ntry under the law of which it is incorporate	3. 47-2244955 (FEI number, if applicable	·
10/27/2014	incy under the law of which it is incorporate	(FEI number, if applicable	:)
	Date of Incorporation)	5. Perpetual (Date of duration, if other than	
6. 09/01/2021	rate of incorporation)	(Date of duration, if other than	perpetuar)
	netad office in the day if	See sections 617.1501 & 617.1502, F.S. to dete	
Trace mar cond	ucico attans in riolica il prior in registration.	See sections 617,1301 & 617,1302, F.S. to dete	rmine penalty liability.)
_			
1111 50	perior Ave E # 111	4 Cleveland OH 40	COUZ
	(Current mai	ling address, if different)	+114
	-		
8. Charit	able Organization t	v carry out Economic)	evelopment
(Purpose(s) of	corporation authorized in home state or cou	v carry out Gonomic 1) ntry to be carried out in the state of Florida) Communities	
	eet address of Florida registered agent:		202
	eer agaress of Frontia registered agent.	(1.0. box NOT acceptable)	± 60
Name:	Corporation Service Company		· · · · · · · · · · · · · · · · · · ·
	1201 Hays Street		2021 SEP 23
Office Address:	Tallahassee	22021	(The - 1 a a a a a a a a a a a a a a a a a a
	(City)	, Florida ³²⁰³¹ (Zip Code)	
	(City)	(Zip Code)	
10. Registered	agent's acceptance:		် သ
Having been na Jesianated in th	imed as registered agent and to accept.	service of process for the above stated co ointment as registered agent and agree to	rporation at the place
turther avree to	Comply with the provisions of all statu	iles relative to the proper and complete n) act in this capacity. I erformance of my duties.
and I am famili	ar with and accept the obligations of n	ny position as registered agent.	,,
	Corporation Service Company	Δ .	
	By: Eyluma By Assistant Vice Pre	there	
	Assistant Vice Pre	esident ered agent's signature)	
	,····3····		

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. DIRECTOR				
□Chairman	Name: John Palyo	☐ Chairman	Name:	
□Vice Chairman	Address: 5650 Greenwood Plaza	☐ Vice Chairman	Address:	
Director	Greenwood Village, CO 80111	Director		
≅ President		□President		•
□Vice President		□Vice President		• .
☐ Secretary	□Treasurer	Secretary		OTreasurer
□Other:	Other:	Other:		Other:
□Chairman	Name: Ann Finnegan	□ Chairman	Name:	
□Vice Chairman	Address: 29 Marne Street	□ Vice Chairman		
≣ Director	Watervliet, NY 12189	□Director		•
□President		□President		
□Vice President		☐ Vice President		
☐ Secretary	☐Treasurer	☐ Secretary		☐Treasurer
□Other:		Other:		Other:
□Chairman	Gertrude Scriven	□ Chairman	Name:	
□Vice Chairman	Address:	□ Vice Chairman		
□Director	Suite 1114	Director		
□President	Cleveland, OH 44114	□President		
□Vice President		□Vice President		
Secretary	☐Treasurer	☐ Secretary		☐Treasurer
□()ther:	Other:	□Other:		□Other:
Non-indexed indig	Notice: Use an attachment to apport more the induals may be added to the index when filing the index when it is a secretary that is a secretary the index when filing the index when it is a secretary that it is a secretary the index	your Florida Department of	of State Annu	al Report form,



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NDC ECONOMIC DEVELOPMENT LENDING,

INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE

AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR

AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF

SEPTEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NDC ECONOMIC DEVELOPMENT LENDING, INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2014.

Authentication: 204176522

Date: 09-16-21

5628005 8300C SR# 20213266730