

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

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TALLAHASSEE, FL

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Email Address: _____

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FOREIGN PROFIT/NONPROFIT CORPORATION

Vital Talk

Certificate of Status	0
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S. FRANKLIN

NOV 16 2021

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Help

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. Vital Talk

(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.)

Vital Talk Corporation

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

2. Washington

(State or country under the law of which it is incorporated)

3. 30-0745689

(FEI number, if applicable)

4. 05/31/2012

(Date of Incorporation)

5. _____

(Date of duration, if other than perpetual)

6. _____

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

7. 600 1st Ave. Ste. 605 Seattle Washington 98104

(Principal office street address)

(Current mailing address, if different)

8. SEE ATTACHMENT

(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: Northwest Registered Agent LLC

Office Address: 7901 4th St N STE 300

St. Petersburg

(City)

Florida 33702

(Zip Code)

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.

Tom Glover

(Registered agent's signature)

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.

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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: Lynsey Seabrook
☐ Vice Chairman Address: 600 1st Ave. Ste. 605
☒ Director Seattle WA 98104
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: James Tulsy
☐ Vice Chairman Address: 113 Pembroke St. Apt. 1
☐ Director Boston MA 02118
☐ President _____
☐ Vice President _____
☒ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Robert Arnold
☐ Vice Chairman Address: 1232 N Highland Ave.
☐ Director Pittsburgh PA 15213
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Naveen Rajkumar
☐ Vice Chairman Address: 600 1st Ave. Ste. 605
☐ Director Seattle WA 98104
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Member ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ 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. Lynsey Seabrook
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Lynsey Seabrook
 (Typed or printed name and capacity of person signing application)

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 CLERK OF CIRCUIT COURT
 IN AND FOR THE COUNTY OF
 HARRIS, TEXAS

ARTICLE III

The purpose or purposes for which the corporation is organized are as follows:

The corporation is organized exclusively for charitable, religious, educational, and scientific purposes, within the meaning of section 501(c)(3) of the Internal Revenue code of 1986 (as amended), including, without limitation, the training of medical professionals and others in effective skills for communication, coping, and relationship building.

Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

No part of the net earnings of the organization shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof. No substantial part of the activities of the organization shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the organization shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of this document, the organization shall not carry on any other activities not permitted to be carried on (a) by any organization exempt from federal income tax under section 501 (c) (3) of the Internal Revenue Code, corresponding section of any future federal tax code, or (b) by an organization, contributions to which are deductible under section 170 (c) (2) of the Internal Revenue Code, or corresponding section of any future federal tax code.



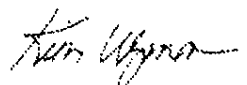
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for the public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is then located, exclusively for the purposes or to such organization or organizations, as said court shall determine, which are organized and operated exclusively for such purposes.

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CLERK OF COURT
TALLAHASSEE, FL

NEW JERSEY DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES

CERTIFICATE OF AUTHORITY

VITAL TALK CORPORATION
0450701051

<p>UNITED STATES OF AMERICA</p> <p>The State of  Washington</p> <p>Secretary of State</p>	
<p>I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this</p>	
<p>CERTIFICATE OF EXISTENCE</p>	
<p>OF</p>	
<p>VITAL TALK</p>	
<p>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 05/31/2012.</p>	
<p>I 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.</p>	
<p>I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.</p>	
<p>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.</p>	
<p>Issued Date: 09/08/2021 UBI Number: 603 211 661</p>	<p>TALLAHASSEE, FL</p>
<p></p>	<p>Given under my hand and the Seal of the State of Washington at Olympia, the State Capital</p> <p></p> <p>Kim Wyman, Secretary of State</p> <p>Date Typed: 09/08/2021</p>

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