

F2200000812

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

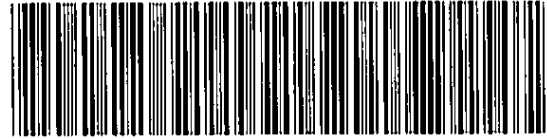
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COGENCYGLOBAL.COM

Date: **February 09, 2022**

Account#: I20000000088

Name: **GREG PINTACUDA**

Reference #: **1595471**

Entity Name: **DUKE CORPORATE EDUCATION, INC.**

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

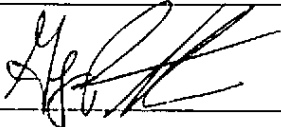
☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other **APON FILING PROVIDE CERTIFIED COPY**

Authorized Amount: **\$78.75**

Signature: 

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Duke Corporate Education, 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:

Barbara M. Frick

Name of Person

Duke Corporate Education

Firm/Company

310 Blackwell Street

Address

Durham, North Carolina 27701

City/State and Zip Code

Barbara.Frick@DukeCE.com

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

For further information concerning this matter, please call:

Jolene Beaty

Name of Person

at (704)
Area Code

331-5731

Daytime Telephone 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

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. Duke Corporate Education, 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. North Carolina 3. 42-1672476
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 10, 2005 5. n/a
(Date of Incorporation) (Date of duration, if other than perpetual)

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

7. 310 Blackwell Street, Durham, North Carolina 27701
(Principal office street address)

n/a
(Current mailing address, if different)

8. Custom corporate education
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

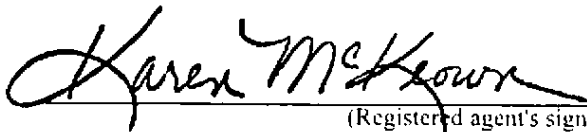
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Cogency Global Inc.
Office Address: 115 North Calhoun Street, Suite 4
Tallahassee, Florida 32301
(City) (Zip Code)

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TALLAHASSEE, FL

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.


(Registered agent's signature)

Karen McKeown, Asst. Sec.

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: William F. Boulding
☐ Vice Chairman Address: 310 Blackwell Street
☐ Director Durham, NC 27701
☐ President USA
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Sally Kornbluth
☒ Vice Chairman Address: 310 Blackwell Street
☐ Director Durham, NC 27701
☐ President USA
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

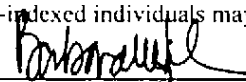
☐ Chairman Name: Thayanayage Chetty
☐ Vice Chairman Address: 310 Blackwell Street
☐ Director Durham, NC 27701
☐ President USA
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: CEO ☐ Other: _____

☐ Chairman Name: Paul Mathews
☐ Vice Chairman Address: 310 Blackwell Street
☐ Director Durham, NC 27701
☐ President USA
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: CFO ☐ Other: _____

☐ Chairman Name: Christine Robers
☐ Vice Chairman Address: 310 Blackwell Street
☐ Director Durham, NC 27701
☐ President USA
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: CMO ☐ Other: _____

☐ Chairman Name: Barbara M. Frick
☐ Vice Chairman Address: 310 Blackwell Street
☐ Director Durham, NC 27701
☐ President USA
☐ 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. Barbara M. Frick, Secretary
(Typed or printed name and capacity of person signing application)



NORTH CAROLINA

Department of the Secretary of State

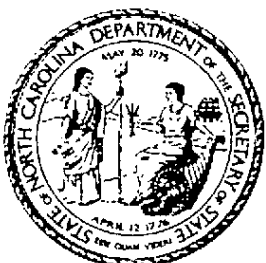
CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

DUKE CORPORATE EDUCATION

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 10th day of June, 2005 , with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 11th day of January, 2022.

Elaine F. Marshall