

F22000005237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

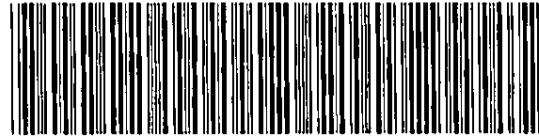
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 AUG 18 PM 4:54

STATE OF FLORIDA

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S. FRANKLIN

AUG 19 2022



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 08/18/2022

Name: Jennifer Bialowas

Reference #: 1736895

Entity Name: FII - NATIONAL Inc

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other Upon filing please provide a certified copy

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Authorized Amount: 78.75

Signature:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FII-National
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:

Michelle Chao-Nguyen

Name of Person

FII-National

Firm/Company

663 13th St, Suite 200

Address

Oakland, CA 94612

City/State and Zip Code

compliance@uptogether.org

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

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For further information concerning this matter, please call:

John Sanchez

Name of Person

512

Area Code

800-9926

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:

FII-National Inc

1. _____
(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. CA 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 09/26/2006 5. _____
(Date of Incorporation) (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. 663 13 St, Suite 200, Oakland, CA 94612
(Principal office street address)

(Current mailing address, if different)

8. We recognize, highlight and invest in the ingenuity and entrepreneurship of people in undervalued communities and partner with government and philanthropy to do the same.

(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)

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.

 Asst. Secretary

(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: Paula Sneed
 Vice Chairman Address: 9325 Tournament Canyon Dr
 Director Summerlin, NV 89144
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: Amina Fahmy
 Vice Chairman Address: 200 Clarendon St, 9th Fl
 Director Boston, MA 02116
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: Jesus Gerena
 Vice Chairman Address: 1916 E 24th Street
 Director Oakland, CA 94606
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other: CEO Other: _____

Chairman Name: Michelle Chao-Nguyen
 Vice Chairman Address: 22330 Cameron Way
 Director Castro Valley, CA 94546
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other: VP of Human Resources Other: _____

Chairman Name: William Bailey
 Vice Chairman Address: 2334 Jones Street
 Director San Francisco, CA 94133
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: Jesse Casso, Jr.
 Vice Chairman Address: 306 Bental Ave
 Director Los Angeles, CA 90049
 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. Michelle Chao-Nguyen
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Michelle Chao-Nguyen VP of Human Resources
 (Typed or printed name and capacity of person signing application)



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: FII - NATIONAL
Entity No.: 2792762
Registration Date: 09/26/2006
Entity Type: Nonprofit Corporation - CA - Public Benefit
Formed In: CALIFORNIA
Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 13, 2022.

SHIRLEY N. WEBER, PH.D.
Secretary of State

2022-07-13
PH D: WEBER

Certificate No.: 029152024

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at bizfileOnline.sos.ca.gov.