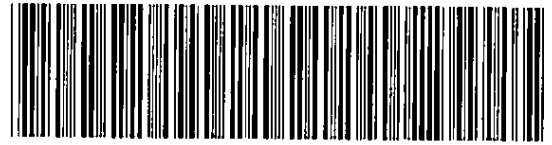


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FILED  
TALMONT, OHIO

2022 SEP 26 PM 4:33  
TALMONT, OHIO

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

T. LEMIEUX  
SEP 27 2022

# Advanced Incorporating Service

1317 California Street  
P.O. Box 20396  
Tallahassee, FL 32316

Phone: 850-222-CORP  
Fax: 850-575-2724  
Email: [wlopez@aisincfl.com](mailto:wlopez@aisincfl.com)  
Website: [www.aisincfl.com](http://www.aisincfl.com)

<p style="text-align: center;">NAME OF ENTITY</p> <p><i>National Early Childhood Program Accreditation Commission, Inc.</i></p>	FOR OFFICE USE ONLY
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## PICK ONE:

CERTIFIED COPY     PHOTOCOPY     C.U.S.

## FILING:

CORPORATION     LLC     LIMITED PARTNERSHIP     GENERAL PARTNERSHIP  
 FICTITIOUS NAME     SERVICEMARK/TRADEMARK     AMENDMENT  
 FOREIGN QUALIFICATION     JUDGMENT LIEN  
 OTHER \_\_\_\_\_

## RETRIEVAL:

GOOD STANDING CERT/C.U.S.     CERTIFIED COPY     PHOTOCOPY  
Of \_\_\_\_\_

## APOSTILLE/NOTARY CERTIFICATION REQUEST:

Country \_\_\_\_\_

Amount of Documents \_\_\_\_\_

DATE 9/24/22    TIME \_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_

**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. NATIONAL EARLY CHILDHOOD PROGRAM ACCREDITATION COMMISSION, 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. District of Columbia 3. \_\_\_\_\_  
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/04/1993 5. \_\_\_\_\_  
 (Date of Incorporation) (Date of duration, if other than perpetual)

6. 09/26/2022  
 (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 7010 Little River Turnpike, Suite 320, Annandale, Virginia 22003  
 (Principal office street address)

(Current mailing address, if different)

8. For the purpose of accrediting early childhood programs and providing credentials for early care and education, professionals, managers and the public about the importance of such accreditation.

(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: Universal Registered Agents, Inc.

Office Address: 1317 California Street

Tallahassee

(City)


, Florida 32304

(Zip Code)

FILED  
 2022 SEP 26 AM 11:10  
 TALLAHASSEE, FLORIDA

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)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to

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: Barbara Palmer  
 Vice Chairman Address: 1350 Blair Drive, Suite G  
 Director Odenton, MD 21113  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_

Chairman Name: Julie Pelletier  
 Vice Chairman Address: 558 Elm Street  
 Director Fair Bluff, NC 28439  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_

Chairman Name: Storm Webb  
 Vice Chairman Address: 8524 Richmond Ave  
 Director Alexandria, VA 22309  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other: Executive Director  Other: \_\_\_\_\_

Chairman Name: Cynthia Lehnoff  
 Vice Chairman Address: 132 Tuscany Chase Dr  
 Director Daytona Beach, FL 32117  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other: Board Member  Other: \_\_\_\_\_

Chairman Name: \_\_\_\_\_  
 Vice Chairman Address: \_\_\_\_\_  
 Director \_\_\_\_\_  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_

Chairman Name: \_\_\_\_\_  
 Vice Chairman Address: \_\_\_\_\_  
 Director \_\_\_\_\_  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_

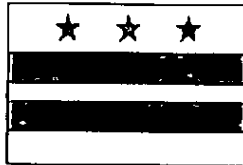
**NOTE: Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. Barbara Palmer  
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Barbara Palmer  
 (Typed or printed name and capacity of person signing application)

Initial File #: 930763  
Entity Type: Non-Profit Corporation

**GOVERNMENT OF THE DISTRICT OF COLUMBIA**  
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS  
CORPORATIONS DIVISION



**C E R T I F I C A T E**

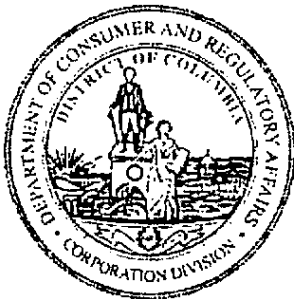
**THIS IS TO CERTIFY** that all applicable provisions of the District of Columbia Business Organizations Code (Title 29) have been complied with and accordingly, this **CERTIFICATE OF GOOD STANDING** is hereby issued to

NATIONAL EARLY CHILDHOOD PROGRAM ACCREDITATION COMMISSION, INC.  
(THE)

**WE FURTHER CERTIFY** that the domestic entity is formed under the law of the District on 03/04/1993 ; that all fees, and penalties owed to the District for entity filings collected through the Mayor have been paid and Payment is reflected in the records of the Mayor; The entity's most recent biennial report required by § 29-102.11 has been delivered for filing to the Mayor; and the entity has not been dissolved. This office does not have any information about the entity's business practices and financial standing and this certificate shall not be construed as the entity's endorsement.

**IN TESTIMONY WHEREOF I** have hereunto set my hand and caused the seal of this office to be affixed as of 9/26/2022 2:36 PM

Business and Professional Licensing Administration



*Josef G. Gasimov*

JOSEF G. GASIMOV  
Superintendent of Corporations,  
Corporations Division

Muriel Bowser  
Mayor