

F22000006106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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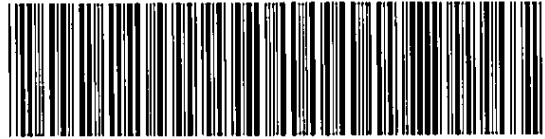
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. LEMIEUX
OCT - 3 2022

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 09/30/2022

Acc#120160000072

en: c DW

Name:	Project Veritas Inc.
Document #:	
Order #:	14564596

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

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Amount: \$ 78.75

Thank you!

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Project Veritas
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:

Elizabeth Prendergast

Name of Person

Michael Best & Friedrich LLP

Firm/Company

675 15th St.

Ste. 2000

Address

Denver, CO 80202

City/State and Zip Code

adnolanhorvey@michaelbest.com

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

For further information concerning this matter, please call:

Amy Nolan-Horvey

Name of Person

at

303

Area Code

228-2380

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. Project Veritas 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. Virginia 3. 27-2894856
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06/22/2010 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. 02/01/2022
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 135 Hoyt Avenue, Mamaroneck, NY 10543
(Principal office street address)

1214 W. Boston Post Road, No. 148, Mamaroneck, NY 10543
(Current mailing address, if different)

8. Charitable
(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.

Christa Mar... Asst. Secy.
(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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TALLAHASSEE, FL

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: James O'Keefe
☐ Vice Chairman Address: 135 Hoyt Avenue
☒ Director Mamaroneck, NY 10543
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Matt Tyrmand
☐ Vice Chairman Address: 135 Hoyt Avenue
☒ Director Mamaroneck, NY 10543
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: John K. Garvey
☐ Vice Chairman Address: 135 Hoyt Avenue
☒ Director Mamaroneck, NY 10543
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Tom O'Hara
☐ Vice Chairman Address: 135 Hoyt Avenue
☒ Director Mamaroneck, NY 10543
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Chief Financial C ☐ Other: _____

☐ Chairman Name: John Sullivan
☐ Vice Chairman Address: 135 Hoyt Avenue
☒ Director Mamaroneck, NY 10543
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☒ Other: Chief Compliance Officer ☐ Other: _____

☐ Chairman Name: Jered Ede
☐ Vice Chairman Address: 135 Hoyt Avenue
☒ Director Mamaroneck, NY 10543
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Chief Legal Officer ☐ 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. Tom O'Hara
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Tom O'Hara, CFO
 (Typed or printed name and capacity of person signing application)

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

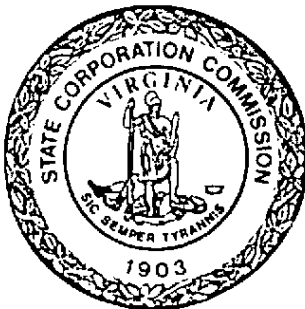
That Project Veritas is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on June 22, 2010;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

September 9, 2022

A handwritten signature in black ink, reading "Bernard J. Logan".

Bernard J. Logan, Clerk of the Commission