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COVER LETTER

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TO: New Filing Section Division of Corporations

SUBJECT: Laura M. and Peter T. Grauer Foundation. 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:

John Voinski	
	Name of Person
Geller Advisors LLC	
	Firm/Company
<u>PQ Box 1510</u>	Address
New York, NY 10150	ity/State and Zip Code
C	nyrstate and Zip Code
JVoinski@gellerco.com E-mail address: (to be	used for future annual report notification)
For further information concerning this m	atter, please call:
John Voinski Name of Person	at (646) 963-9373 Area Code & Daytime Telephone Number
MAILING ADDRESS: New Filing Section	STREET/COURIER ADDRESS: New Filing Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amo	ount:
S \$70.00 Filing Fee □\$78.75 Filing	Fee &

ig Fee □\$78.75 Filing Fee & □\$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 29, 2022

JOHN VOINSKI P.O. BOX 1510 NEW YORK, NY 10150

SUBJECT: LAURA M. AND PETER T. GRAUER FOUNDATION, INC. Ref. Number: W22000123988

We have received your document for LAURA M. AND PETER T. GRAUER FOUNDATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 622A00021788

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:

Laura M. And Peter T. Grauer Foundation, TnC .

(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.)

Delaware		3.	52-1702126				
(State or cou	ntry under the law of which it is incorpor	ated)	(FEI number, if ap	plicable)			
12/09/1988		5	perpetual				
(Date of Incorporation)		(Date of duration, if of	ther than pe	erpetua	al)	
11/05/2020							
Date first cond	ucted affairs in Florida if prior to registration	on. See .	sections 617.1501 & 617.1502, F.S	S, to determ	ine per	nalty lia	<u>ibil</u> it <u>j</u>
201 El Bray	o Way, Palm Beach, FL 33480						
		oal offic	ce street address)				
	// urrent n						
			addrace if different)				
	(Curen h	iailing :	address, if different)				_
Officers be	came FL residents and will operate in FL	2				202	
Officers be (Purpose(s) of		2		orida)	<u>.</u>	2022 0	
(Purpose(s) of	came FL residents and will operate in FL corporation authorized in home state or c	ountry	to be carried out in the state of Fl	orida)	• <u>•</u>	2022 OCT	÷ ,
(Purpose(s) of	came FL residents and will operate in FL	ountry	to be carried out in the state of Fl	orida)		2022 OCT - 6	
(Purpose(s) of Name and <u>sti</u>	came FL residents and will operate in FL corporation authorized in home state or c	ountry	to be carried out in the state of Fl	orida)	•	σ	
(Purpose(s) of Name and <u>sti</u> Name:	came FL residents and will operate in FL corporation authorized in home state or c eet address of Florida registered ager Corporation Service Company	ountry	to be carried out in the state of Fl	orida)		6 PM	
(Purpose(s) of Name and <u>sti</u> Name:	came FL residents and will operate in FL corporation authorized in home state or c eet address of Florida registered ager	ountry	to be carried out in the state of Fl	orida)		σ	ן <u>אר</u> נט

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.

Corporation Service Company By: Brandy Milligan (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. · · · ·

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Dissulur
Director:
Address:
B. OFFICERS
President:Peter T. Grauer
Address: c/o Geller Advisors. PO Box 1510. New York, NY 10150
Vice President: Laura M. Grauer
Address:C/o Geller Advisors, PO Box 1510, New York, NY 10150
Secretary:
Address:
Treasurer: Peter T. Grauer
Address:c/o Geller Advisors, PO Box 1510, New York, NY 10150
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14 Peter T. Grauer, President
(Typed or printed name and capacity of person signing application)



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "LAURA M. AND PETER T. GRAUER FOUNDATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE NINTH DAY OF DECEMBER,

A.D. 1988, AT 9 O'CLOCK A.M.

CERTIFICATE OF REVIVAL, FILED THE TWENTY-THIRD DAY OF AUGUST, A.D. 2022, AT 12:50 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID CORPORATION, "LAURA M. AND PETER T. GRAUER FOUNDATION".



Authentication: 204344797 Date: 09-08-22

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SR# 20223454236 You may verify this certificate online at corp.delaware.gov/authver.shtml Page 1



The First State

Page 2

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE

BEEN FILED TO DATE.



Authentication: 204344797 Date: 09-08-22

2180663 8310

SR# 20223454236 You may verify this certificate online at corp.delaware.gov/authver.shtml

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:

Laura M. And Peter T. Grauer Foundation

(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.)

	3	
(State or co	3 untry under the law of which it is incorporated)	(FEI number, if applicable)
•	5	(Date of duration, if other than perpetual)
((Date of Incorporation)	(Date of duration, if other than perpetual)
		tions 617.1501 & 617.1502, F.S. to determine penalty liabilit
•	(Principal office	street address)
	Current molling ad	dress, il different)
	(Current maring add	ness. in amerent)
(Purpose(s) o	f corporation authorized in home state or country to	be carried out in the state of Florida)
•		
. Name and <u>s</u>	treet address of Florida registered agent: (P.O. I	30x <u>NOT</u> acceptable)
Name:	Corporation Service Company	
Office Address	S: 1201 Hays Street	· · ·
	Tallahassee	Florida ³²⁰³¹

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.

Corporation Service Company

By: Brandy Milligan Brandy Milligan Asst. VP 5/10/2022 (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.