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CORPORATE ACCESS, _

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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COVER LETTER

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10:	Division o	n Section of Corporations				
STIRI	Wadh	wani Operating Found	lation Inc.			
ЗОДО	EC1			tion – must i	oclude suffix	
Dear S	Sir or Madam	• •				
Affair	s in Florida",	lication by Foreign "Certificate of Exis eferenced not for pr	tence", or "	Certificate of	f Status" and ch	ation to Conduct its seck are submitted to Florida.
Please	return all con	rrespondence conce	rning this m	atter to the f	ollowing:	
	Rob	Wexler				
			Name	of Person		· <u> </u>
	Adl	er & Colvin				
		<u> </u>	Firm	Company		
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	135	135 Main Street, 20th Floor				
	Address					
	San	Francisco, California		<u> </u>		 _
	wexl	er@adlercolvin.com	City/State	and Zip Cod	e	
		E-mail address: (to	be used for	future annu	al report notific	ation)
For fu	rther informa	tion concerning this				,
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□ \$ 70	.00 Filing Fe	e □\$78.75 Fili:		≅\$7 8.75]	Filing Fee & ied 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:

(Name of corpor	ge as will clearly indicate that it is a corpo	RATED" or "CORPORATION" or words or abbreviations of like ration instead of a natural person or partnership if not so contained ed as a corporate suffix by a nonprofit corporation.)
(If name unava	ilable in Florida, enter alternate corporate	name adopted for the purpose of transacting business in Florida)
2. California		3. 38-3840804
(State or coun	ntry under the law of which it is incorporate	
4. 05/06/2011		5. Perpetual
(D	Pate of Incorporation)	(Date of duration, if other than perpetual)
6 07/06/2022 (hi	ire date of employee living and working in	i Florida)
(Date first condu	ucted affairs in Florida if prior to registration	. See sections 617.1501 & 617.1502, F.S, to determine penalty liability.)
·· -	Principa	office street address)
C/ORWX		
PO Box 1987, 1	Los Altos, CA 94023	iling address, if different)
e See attachment	·	untry to be carried out in the state of Florida) (P.O. Box NOT acceptable)
		untry to be carried out in the state of Florida)
9. Name and stre	eet address of Florida registered agent:	(P.O. Box NOT acceptable)
Name:	Registered Agent Solutions, Inc.	
	155 Office Plaza Drive, Suite A	1: 05 1: 05
	Tallahassee	, Florida 32301 (Zip Code)
	(City)	(Zip Code)
Having been na designated in th further agree to	is application, I hereby accept the app	t service of process for the above stated corporation at the place pointment as registered agent and agree to act in this capacity. I tutes relative to the proper and complete performance of my duties,
	More Regist	Mackenzie Hart, Asst, Secretary tered 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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

□ Chairman	Name:	Chairman Nan	Kathleen E. Wadhwani
C. □Viœ Chairman	O RUY PO Box 1987	C/o€ □Vice Chairman Addr	PO Box 1987
■ Director	Los Altos, CA 94023	Los	Altos, CA 94023
■ President	_	President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	≡ Secretary	■ Treasurer
□Other:	Other:	Other:	Other:
□Chairman	Name: Ajay Kela C/ORUXLLC PO Box 1987 Address:	□Chairman Nam ☑ ○ R W X □ □ Vice Chairman Addre	Lauren Renken ne: PO Box 1987 ess:
Director	Los Altos, CA 94023		Altos, CA 94023
□President		President	
□Vice President		□Vice President	
Secretary	☐ Treasurer	☐ Secretary	□Treasurer
■Other: Executiv	Director	Other: Assistant Treas	urer DOther:
□Chairman □Vice Chairman	Name:		LANGE POOL
Director			ess:
☐President		President	95
□Vice President		□ Vice President	
☐Secretary	□Treasurer	Secretary	☐ Treasurer
Other:		-	Other:
NOTE: Important Non-indexed indiv	t Notice: Use an attachment to report more riduals may be added to the index when fill (Signature of Chairman, vice Chairman, o	ng your Florida Department of State r any officer listed in number 12 of t	Annual Report form.
14		en, Assistant Treasurer	

Attachment of WADHWANI OPERATING FOUNDATION

to

Application by Foreign Not For Profit Corporation for Authorization to Conduct its Affairs in Florida with Department of State

Item 8. Purpose(s) of Wadhwani Operating Foundation

Wadhwani Operating Foundation (the "Foundation") is a California nonprofit public benefit corporation engaged in charitable and educational activities, including improving vocational education in India. The Foundation is expanding its operations and maintains one or more employees in the State of Florida.





Secretary of State Certificate of Status



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

Entity Name:

WADHWANI OPERATING FOUNDATION

Entity No.:

3375226 05/06/2011

Registration Date: 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 September 07, 2022.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 043148327

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