F23000001457

(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



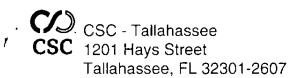
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2023 MAR 13 PH 2: 24

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APOROVE, AND

DECEIVED



850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 03/13/23 Order #: 558405-1

Re: The Ryan Animal Rescue Foundation Incorporated

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$78.75 - FL State Account Number: Systille rade

12000000195

AUTHORIZATION:

Please take the following action:

File in your office on basis Issue Proof of FiLING

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:	stration Section sion of Corporations					
CHIDI	ECT: The Ryan Animal Rescue Foundation					
SUDJ	Name of Corporation – must include suffix					
Dear S	r or Madam:					
Affair	elosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to the above referenced not for profit corporation to conduct its affairs in Florida.					
Please	return all correspondence concerning this matter to the following:					
	Ivy M. Shapiro, Paralegal					
	Name of Person					
	Blank Rome LLP					
	Firm/Company					
One Logan Square, 9th Floor						
	Address					
Philadelphia, PA 19103						
	City/State and Zip Code					
	connie@rarf.org					
	E-mail address: (to be used for future annual report notification)					
For fu	her information concerning this matter, please call:					
Ivy M	Shapiro 215 569-5784 at ()					
	Name of Person Area Code Daytime Telephone Number					
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, Fl. 323142415 N. Monroe Street, Suite 810Tallahassee, Fl. 32303					
Please	ed is a check for the following amount: nake check payable to: FLORIDA DEPARTMENT OF STATE 00 Filing Fee \$\Bigsis \$78.75\$ Filing Fee & \$\Bigsis \$78.75\$ Filing Fee & \$\Bigsis \$60.00000000000000000000000000000000000					

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:

(If name unava	allable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
Tennessee	ntry under the law of which it is incorporated)	82-1860222
	ntry under the law of which it is incorporated)	(FEI number, if applicable)
06/13/2017	5.	(Date of duration, if other than perpetual)
		(Date of duration, if other than perpetuar)
Not yet doing	business in Florida	
		sections 617.1501 & 617.1502, F.S. to determine penalty liability.
101 Montgom	ery Street, Suite 2800, San Francisco, CA 9410-	
	(Principal offic	ce <u>street</u> address)
01 Montgome	ry Street, Suite 2800, San Francisco, CA 94104	· Attn: George Luian
OT Wongoine		
	(Continuing)	address, if different)
	(Current maring)	address, if different)
To promote ar		address, if different)
To promote ar Purpose(s) of		tional support to better the lives of animals
Purpose(s) of	imal adoptions and provide financial and educa corporation authorized in home state or country	to be carried out in the state of Florida)
Purpose(s) of	imal adoptions and provide financial and educa	to be carried out in the state of Florida)
Purpose(s) of	imal adoptions and provide financial and educa corporation authorized in home state or country eet address of Florida registered agent: (P.C	to be carried out in the state of Florida) D. Box NOT acceptable)
Purpose(s) of Name and <u>str</u> Name:	imal adoptions and provide financial and educa corporation authorized in home state or country eet address of Florida registered agent: (P.C Corporation Service Company	to be carried out in the state of Florida)
Purpose(s) of Name and <u>str</u> Name:	imal adoptions and provide financial and educa corporation authorized in home state or country eet address of Florida registered agent: (P.C Corporation Service Company	to be carried out in the state of Florida) D. Box NOT acceptable)
Purpose(s) of Name and <u>str</u> Name:	imal adoptions and provide financial and educa corporation authorized in home state or country eet address of Florida registered agent: (P.C	to be carried out in the state of Florida) D. Box NOT acceptable)

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]:

A. DIRECTOR Chairman	Name: Logan Ryan	□Chainnan	Name: Ashley Bragg Ryan
□Vice Chairman	Address:	■ Vice Chairman	Address: 101 Montgomery St., Suite 2800
Director	San Francisco, CA 94104	■ Director	San Francisco. CA 94104
■ President		□President	
□Vice President		■ Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other:	Other:	Other:	Other:
□Chairman	Nathaniel Short	□Chairman	Adam Kile Name:
□Vice Chairman	Address:101 Montgomery St., Suite 2800	□ Vice Chairman	Address: 101 Montgomery St., Suite 2800
■ Director	San Francisco, CA 94104	□Director	San Francisco, CA 94104
□President		□President	
□Vice President		□Vice President	
■ Secretary	□Treasurer	☐ Secretary	■Treasurer
□Other:	Other:	□Other:	□Other:
□Chairman	Name: Sarah Cronin	□Chairman	Name:
□Vice Chairman	Address: 101 Montgomery St., Suite 2800	□Vice Chairman	Address:
■Director	San Francisco, CA 94104	□Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
Other:	Other:	□Other:	
	t Notice: Use an attachment to report more than sold also may be added to the index when filing you will be sold to the index when filing you will be sold to the index when filing you will be sold to the index when filing you will be sold to the index when the sold to the sold t	ur Florida Department o	of State Annual Report form.
14. Ashley Ryai	Typed or printed pump and capacity of	ce President	-



Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

AMY POOLE

March 10, 2023

AMY POOLE 251 LITTLE FALLS DR WILMINGTON, DE 19808

Request Type: Certificate of Existence/Authorization

Issuance Date: 03/10/2023

Request #:

0520115

Copies Requested:

Document Receipt

Receipt #: 007887491

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3846763348

\$20.00

Regarding:

The Ryan Animal Rescue Foundation

Filing Type:

Nonprofit Corporation - Domestic

Control #:

908412

Formation/Qualification Date: 06/13/2017

Date Formed:

06/13/2017

Status:

Active

Duration Term:

Formation Locale: TENNESSEE

Perpetual

Inactive Date:

Business County: WILLIAMSON COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

The Ryan Animal Rescue Foundation

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Cert Web User

Verification #: 059353532