F23000004018

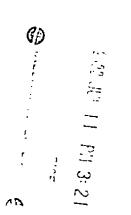
	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	(Business Enlity Name)	
	(Document Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

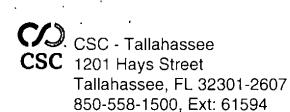
Office Use Only



500411828875

2023 JUL 11 PM 12: 00





To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 07/11/23 Order #: 1232295-1

Re: RCM America Inc.

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.00 - FL State Account Number:

melbele man

120000000195

auth

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:	Registration Section Division of Corporations					
CIID I	ECT: RCM America Inc.					
SODO	Name of Corporation – must include suffix					
Dear S	Sir or Madam:					
Affair	iclosed "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:					
	Nicole R. Tzetzo					
	Name of Person					
	RCM America Inc.					
	Firm/Company					
	491 Deleware Avenue					
	Address					
	Buffalo, NY 14202					
	City/State and Zip Code					
	nrt@tzetzo.com					
	E-mail address: (to be used for future annual report notification)					
For fu	rther information concerning this matter, please call:					
Nicol	e R. Tzetzo 14202 716-854-1930 at ()					
	Name of Person Area Code Daytime Telephone Number					
	Mailing Address: Street Address:					
	Registration Section Registration Section					
	Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee					
	P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810					
	Tallahassee, FL 32314 Tallahassee, FL 32303					
Enclo	sed is a check for the following amount:					
	make check payable to: FLORIDA DEPARTMENT OF STATE 0.00 Filing Fee					
≝ \$7	0.00 Filing Fee □\$78.75 Filing Fee & □\$78.75 Filing Fee & □\$87.50 Filing Fee, Certificate of Status Certified Copy 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:

(If name unava	lable in Florida, enter alternate corporate na	me adopted for the purpose of transacting busin	ess in Florida)	
New York		3. 45-4614427 (FEI number, if applicable)		
(State or cour	try under the law of which it is incorporated	(FEI number, if applicable)		
June 3, 2011		5. (Date of duration, if other than pe		
(5)		See sections 617.1501 & 617.1502, F.S. to determ	ine penalty liabilit	r.)
		see sections of 7.1301 & of 7.1392, 1.3. to where	, n. j	,,,
491 Deloware	Avenue, Buffalo, NY 14202			
	(Principal o	office <u>street</u> address)		
	(Current mailt	ng address, if different)	202	
			TOP 3	
To conduct a r			.~-1	
To conduct a p	rogram of assessing students' practical and ti	heoretical knowledge by: See attached for furthe	information-	-car
(Purpose(s) of o	rogram of assessing students' practical and the opporation authorized in home state or countries of the coun	heoretical knowledge by: See attached for furthe try to be carried out in the state of Florida)	:J -	******
(Purpose(s) of c egards to this se	orporation authorized in home state or countries.	try to be carried out in the state of Florida)	12 -	-
(Purpose(s) of c egards to this se	orporation authorized in home state or coun	try to be carried out in the state of Florida)	12 -	
(Purpose(s) of c egards to this se	orporation authorized in home state or countilion. eet address of Florida registered agent: (I	try to be carried out in the state of Florida)	12 -	
(Purpose(s) of c egards to this se Name and stra Name:	orporation authorized in home state or countation. et address of Florida registered agent: (I Corporation Service Company	P.O. Box NOT acceptable)	1 PH	WEETE TO THE TENT
(Purpose(s) of cegards to this see Name and street	corporation authorized in home state or countrion. cet address of Florida registered agent: (I Corporation Service Company 1201 Hays Street	P.O. Box NOT acceptable)	12 -	
(Purpose(s) of cegards to this see Name and street	corporation authorized in home state or countrion. cet address of Florida registered agent: (I Corporation Service Company 1201 Hays Street	P.O. Box NOT acceptable)	12 -	***
(Purpose(s) of cegards to this see Name and street	corporation authorized in home state or countrion. cet address of Florida registered agent: (I Corporation Service Company 1201 Hays Street	P.O. Box NOT acceptable)	12 -	
(Purpose(s) of o egards to this se Name and <u>stra</u> Name: ffice Address:	corporation authorized in home state or countrion. cet address of Florida registered agent: (I Corporation Service Company 1201 Hays Street Tallahassee (City)	P.O. Box NOT acceptable)	12 -	
(Purpose(s) of organds to this se Name and structure Name: Tice Address: (). Registered aving heen no	corporation authorized in home state or countrion. cet address of Florida registered agent: (I Corporation Service Company 1201 Hays Street Tallahassee (City) agent's acceptance: med as registered agent and to accept si	P.O. Box NOT acceptable) , Florida 32031	RY OF STATE Oration at the plant of the pla	ie.
(Purpose(s) of organds to this se Name and structure Name: Name: Tice Address: O. Registered aving been name and signated in the	corporation authorized in home state or countrion. eet address of Florida registered agent: (I Corporation Service Company 1201 Hays Street Tallahassee (City) agent's acceptance: med as registered agent and to accept sis application. I hereby accept the appo	P.O. Box NOT acceptable) , Florida 32031	PH 12: 00 oration at the place in this capacity	lac
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(Purpose(s) of cregards to this se regards to this se. Name and structure Name: Office Address: O. Registered laving been name in the structure to the structure of the struct	corporation authorized in home state or counterion. Let address of Florida registered agent: (If Corporation Service Company 1201 Hays Street Tallahassee (City) agent's acceptance: med as registered agent and to accept so is application, I hereby accept the apportant comply with the provisions of all statut ar with and accept the abligations of my	P.O. Box NOT acceptable) , Florida 32031	PH 12: 00 oration at the place in this capacity	lac ity:

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	B . C:		
□ Chairman	Name: 273 Bloor Street West, Toronto	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
■Director	Ontario	□Director	
President		□President	
□Vice President		□Vice President	
☐ Secretary	Treasurer	☐ Secretary	□Treasurer
□Other:	Other:	□Other:	Other:
□Chairman	Jeffery Hillis	□ C hairman	Name:
□Vice Chairman	Address: 273 Bloor Street West, Toronto	□Vice Chairman	Address:
■Director	Ontario	□Director	
□President		□President	
□Vice President		□Vice President	
■ Secretary	Treasurer	Secretary	□Treasurer
Other:	□ Other:	□Other:	Other:
	Gary Gartner Name:	□Chairman	Name:
□Vice Chairman	285 Central Drive, Briarcliff,	□Vice Chairman	Address:
⊡ Director	NY 10510	□Director	
□President		□President	
□Vice President		□Vice Presideπt	
□ Secretary	□Treasurer	☐ Secretary	□Treasurer
□ Other:	☐ Other:	□Other:	Other:
Non-indexed indiv	it Notice: Use an attachment to report more than viduals may be added to the index when filing you (Signature of Chairman, Vice Chairman, or any s	our Florida Department o	f State Annual Report form. 12 of the application)

APPLICATION BY FOREIGN NOT FOR PROFIR CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FL, FORM. Section #8 Cont.

(i) Defining national standards of achievement in music education in comprehensive sequentially graded curricula; (ii) Providing comprehensive materials and tools to assist music educators Providing comprehensive materials and tools to assist music including repertoire lists and innovative teaching resources; and (iii) administering and conducting written and practical evaluations to assess students' achievement against the requirements of the curricula.

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name:

RCM AMERICA INC.

DOS ID Number:

4102211

Entity Type:

DOMESTIC NOT-FOR-PROFIT CORPORATION

Entity Status:

EXISTING

Date of Initial Filing with DOS:

06/03/2011

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on May 24, 2023 at 03:16 P.M.

Brandon C Higher

ROBERT J. RODRIGUEZ, Secretary of State

By Brendan C. Hughes

Executive Deputy Secretary of State

Authentication Number: 100003573071 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov