

F23000005760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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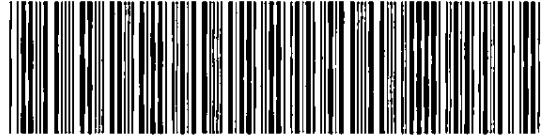
(Business Entity Name)

(Document Number)

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SECRET
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE

2023 OCT -2 PM 2:59

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Local Contexts, 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:

Aaron Williamson

Name of Person

Williamson Legal PLLC

Firm/Company

1421 18th Ave. N

Address

St. Petersburg, FL 33704

City/State and Zip Code

aaron@williamson.legal

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

For further information concerning this matter, please call:

Aaron Williamson at (773) 727-8363

Name of Person Area Code 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. Local Contexts, 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. Navajo Nation 3. 35-2774272
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Sept. 6, 2022 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

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

7. 240 Greene St. LVL 4, New York, NY 10003
(Principal office street address)

(Current mailing address, if different)

8. To support Indigenous communities with tools that can reassert cultural authority in heritage collections and data.
(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)

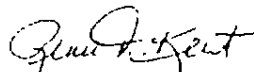
Name: Incorporation Services, Ltd.

Office Address: 1540 Glenway Drive
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, 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.

Renee T. Kent, Assistant Secretary
(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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2023 OCT -2 PM 3:59
TALLAHASSEE
SECRETARY OF STATE

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 Eric Francis, Sr.
☐ Vice Chairman Address: 245 Kirkland Road
☒ Director Old Town, MN 04468
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Kim Christen
☐ Vice Chairman Address: 800 SW Marcia Drive
☒ Director Pullman, WA 99163
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Laurel Haak
☐ Vice Chairman Address: 16445 North Big Pickerel Lane
☐ Director Townsend, WI 54175
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Jane Anderson
☐ Vice Chairman Address: 4 Washington Square Village, 12
☒ Director New York, NY 10012
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Co-Chair ☐ Other: _____

☐ Chairman Name: Matti Hudson
☐ Vice Chairman Address: 5 The Esplanade
☒ Director Huntington, Hamilton 3210
☐ President New Zealand
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Edwin Oh
☐ Vice Chairman Address: 1900 Embarcadero Road, Ste 109
☐ Director Palo Alto, CA 94303
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

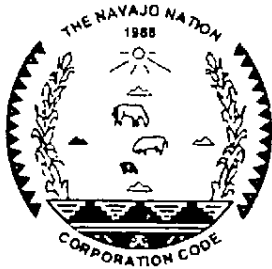
NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. No DocuSigned by: _____ is may be added to the index when filing your Florida Department of State Annual Report form.

13. Laurel Haak
2080100510487444

 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Laurel Haak, Secretary

 (Typed or printed name and capacity of person signing application)



NAVAJO NATION

CORPORATION CODE

CERTIFICATE OF GOOD STANDING

To all to Whom these Presents Shall Come, Greetings:

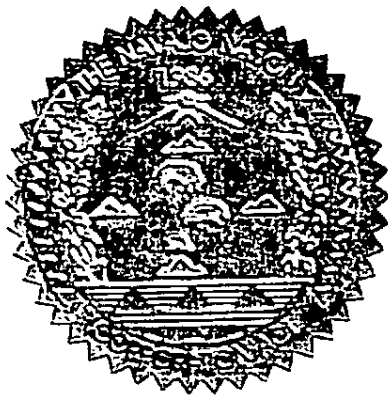
I, the Director of the Business Regulatory Department, DO HEREBY CERTIFY
that

LOCAL CONTEXTS, INC.

File Number: 102853

a Corporation organized under the laws of the Navajo Nation Corporation Act, did
incorporate on September 6th, 2022

I FURTHER CERTIFY that this corporation has filed all affidavits and annual
reports and has paid all annual filing fees required to date and, therefore, is in good
standing within the Navajo Nation.



IN WITNESS WHEREOF, I have hereunto set
my hand and affixed the official seal of the
Navajo Nation Corporation Code. Done at
Window Rock, Arizona, the Capital of the
Navajo Nation, this 5th
day of September, 2023 A.D.

Director, Business Regulatory
Division of Economic Development
Notah C. Silversmith