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KUTAKROCK

Kutak Rock LLP Two Pershing Square | 2300 Main Street, Suite 800, Kansas City, MO 64108-2432 office 816.960.0090

> Kara L. Schlueter 816.502.4835 kara.schlueter@kutakrock.com

April 4, 2024

Via FedEx

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

> Re: Corrected Filing - Foreign Corporation Application - Nonprofit - Reference Number W24000047553

Dear Sir/Madam:

Please find enclosed the Foreign Corporation Application - Nonprofit form, rejection letter reference number W24000047553, as well as a check in the amount of \$1250.00 to cover the civil penalty fee and annual report filing fees.

Please process and return the filed copy using the pre-paid postage envelope provided.

If you have any questions or there is a problem with filing any of the above, please contact me at 816-502-4835 or kara.schlueter@kutakrock.com. Thank you for your assistance.

Sincerely,

Kara L. Schlueter

RECEIVED

Assistant to Ariel M. Sparrow

APR 09 2024

COVER LETTER

SUBJECT:_						
3011013011		Name of Corporati	on – must include suffix			
Dear Sir or M	adam:					
Affairs in Floa	rida", "Cei	ion by Foreign Not for Profi rtificate of Existence", or "C enced not for profit corporat	Certificate of Status" and ch	eck are submitted to		
Please return a	all corresp	ondence concerning this ma	atter to the following:			
	Kara Sel	nlueter				
		Name o	of Person	· · · · · · · · · · · · · · · · · · ·		
	Kutak R	ock LLP				
		Firm/C	Company			
	2300 Main Street					
	Suite 800					
	Address					
	Kansas (City, Missouri 64108				
		City/State a	and Zip Code			
	kara.schl	ucter@kutakrock.com				
	E-n	nail address: (to be used for	future annual report notific	ation)		
For further int	ormation	concerning this matter, plea	ise call:			
Ariel Sparrow		at (417 755-7263			
	Name o	of Person	Area Code Daytime Te	lephone Number		
Mailing Address: Registration Section		Street Address: Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enclosed is a	check for	the following amount:	DAME CALL ONE CARE			
Flease make en \$70.00 Fili		e to: FLORIDA DEPARTMI \$\Bigsig \text{S78.75 Filing Fee & Certificate of Status}\$	□\$78.75 Filing Fee & Certified Copy	□\$87.50 Filing Fee, Certificate of Statu		

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:

n the name at p	ige as will clearly indicate that it it resent. "Company" or "Co." may	is a corporation instead of a natural person or partnersh not be used as a corporate suffix by a nonprofit corpor	hip it not so contained ration.)
(If name unava	nilable in Florida, enter alternate c	corporate name adopted for the purpose of transacting b	business in Florida)
Missouri		ncorporated) 3. 83-0691791 (FEI number, if applicab	
(State or cou 05/29/2018	ntry under the law of which it is it	ncorporated) (FEI number, if applicab	ole)
(1	Date of Incorporation)	5. (Date of duration, if other that	an perpetual)
05/29/2018 Date first cond	ucted affairs in Florida if prior to re	egistration, See sections 617,1501 & 617,1502, F.S. to de	rermine penalty liability.)
	ev St. Springfield, MO 65898		
		(Principal office <u>street</u> address)	
	(Ci	urrent mailing address, if different)	_
Please see atta	ched page		
Please see atta Purpose(s) of		ate or country to be carried out in the state of Florida)	
D		ed agent: (P.O. Box <u>NOT</u> acceptable)	2024 AF
Th		ate or country to be carried out in the state of Florida) ed agent: (P.O. Box <u>NOT</u> acceptable)	2024 APR -
D		ate or country to be carried out in the state of Florida) ed agent: (P.O. Box <u>NOT</u> acceptable)	2024 APR -9 F
D		ate or country to be carried out in the state of Florida) ed agent: (P.O. Box <u>NOT</u> acceptable) , Florida 33324	2024 APR -9 PH 3
D		ed agent: (P.O. Box <u>NOT</u> acceptable) , Florida 33324(Zip Code)	2024 APR - 9 PH 3: 3
Purpose(s) of Name and <u>str</u> Name: fice Address:	corporation authorized in home st cet address of Florida registere CT Corporation System 1200 South Pine Island Road Plantation (City)	ed agent: (P.O. Box <u>NOT</u> acceptable) , Florida 33324(Zip Code)	2024 APR - 9 PH 3: 30
Purpose(s) of Name and str Name: fice Address: 1. Registered wing been not signated in the other agree to	corporation authorized in home st cet address of Florida registere CT Corporation System 1200 South Pine Island Road Plantation (City) Lagent's acceptance: imed as registered agent and to a polication, I hereby acception to comply with the provisions of	tate or country to be carried out in the state of Florida) ed agent: (P.O. Box NOT acceptable) , Florida 33324 (Zip Code) to accept service of process for the above stated continuous the appointment as registered agent and agree of all statutes relative to the proper and complete tions of my position as registered agent.	2024 APR - 9 PH 3: 30 orporation at the place to act in this capacity.

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	RS Robert L. Ziehmer Name:	□Chairman	Shana Parrott
□Vice Chairman	Address: 2500 E Kearney St	□Vice Chairman	Address: 2500 E Kearney St
■Director	Springfield, MO 65898	□Director	Springfield, MO 65898
≅ President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	■ Secretary	Treasurer
□Other:	Other:	□Other:	Other:
□Chairman □Vice Chairman	Name: John P. Morris Address: 2500 E Kearney St Springfold, MO 65808	□Chairman □Vice Chairman	Name: Megan C, Stack Name: 2500 E Kearney St Address: Continue field, MO 65208
■Director	Springfield, MO 65898	Director	Springfield, MO 65898
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
□Other:		□Other:	Other:
□Chairman □Vice Chairman ■Director	Name: Dale Hall Name: 2500 E Kearney St Address: Springfield, MO 65898	□Chairman □Vice Chairman ■Director	Name: Collin O'Mara 2500 E Kearney St Address: Springfield, MO 65898
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□ Secretary	□Treasurer
Other:	☐ Other:	□Other:	
Non-indexed indiv	t 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 at	our Florida Department officer listed in number	of State Annual Report form. 12 of the application)

DocuSign Envelope ID: A732D235-9E45-4451-B8D0-D60DC6C1D856

Additional Directors

Sara Parker Pauley, Director 2500 E. Kearney Street Springfield, MO 65898 417-873-5529 •

* DocuSign Envelope ID: A732D235-9E45-451-B8D0-D60DC6C1D856

Purpose:

To support conservation and education initiatives in conserving wildlife and habitat, connecting new audiences to the outdoors and protecting our outdoor heritage.

STATE OF MISSOUR



John R. Ashcroft Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

Bass Pro Shops & Cabela's Outdoor Fund N000708568

was created under the laws of this State on the 29th day of May, 2018, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 18th day of March, 2024.

becretary of State

Certification Number: CERT-03182024-0026

