## F24000002517

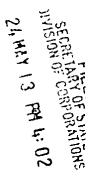
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Gertificates di Status					
Special Instructions to Filing Officer:					
W24-41485					





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04/03/24--01004--003 \*\*87.50





April 18, 2024

ALLISON WRIGHT 120 MARYLAND AVE NE WASHINGTON, DC 20002 US

SUBJECT: DSCC INC

Ref. Number: W24000061485

We have received your document for DSCC INC and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 424A00008453

Ariel Jones Regulatory Specialist II

## **COVER LETTER**

TO:	egistration Section Division of Corporations				
CHDI	ECT: DSCC FL Inc.				
SODI	Name of Corporation – must include suffix				
Dear S	ir or Madam:				
Affairs	closed "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 r the above referenced not for profit corporation to conduct its affairs in Florida.				
Please	return all correspondence concerning this matter to the following:				
	Allison Wright				
	Name of Person				
	DSCC				
Firm/Company					
	120 Maryland Ave NE				
	Address				
	Washington, DC 20002				
	City/State and Zip Code				
	compliance@dscc.org				
	E-mail address: (to be used for future annual report notification)				
For fu	rther information concerning this matter, please call:				
Allise	n Wriht 202 224-2447				
-	Name of Person at () 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	ised is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE  0.00 Filing Fee				

## 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	nilable in Florida, enter alternate co	orporate name adopted for the purpose of transacting business	in Florida)
2. DC		corporated) (FEI number, if a pplicable)	
	ntry under the law of which it is inc	corporated) (FEI number, if applicable)	
4. <u>12/21/1987</u> (E	Date of Incorporation)	5 5	tual)
		gistration. See sections 617.1501 & 617.1502, F.S, to determine	
	·	gistration. See sections 617.1501 & 617.1502, F.S, to determine	penalty liability.)
7. 120 Maryland	Ave NE Washington DC 20002		
	(1	Principal office <u>street</u> address)	
	(Cui	rrent mailing address, if different)	
8. To elect Demo	ocrats to the US Seante		24 24
(Purpose(s) of	corporation authorized in home sta	ate or country to be carried out in the state of Florida)	ISIO:
9. Name and str	eet address of Florida registered	d agent: (P.O. Box NOT acceptable)	SECRE IARY DIVISION OF CO.
Name:	C T Corporation System		72 73 90
1 1001110.	1200 South Pine Island Road		ESTATE EGRATIONS
	Plantation	33324	02 02
	i iaitation	. ЕЮПОЯ	•
	(City)	, Florida 33324 (Zip Code)	
Office Address:  10. Registered Having been na designated in th further agree to	(City)  1 agent's acceptance:  amed as registered agent and to  his application, I hereby accept  o comply with the provisions of	(Zip Code)  o accept service of process for the above stated corporal the appointment as registered agent and agree to act if all statutes relative to the proper and complete performions of my position as registered agent.	tion at the place in this capacity. I nance of my duties
Office Address:  10. Registered Having been na designated in th further agree to	(City)  I agent's acceptance:  I amed as registered agent and to  his application, I hereby accept  o comply with the provisions of  iar with and accept the obligati	o accept service of process for the above stated corpora t the appointment as registered agent and agree to act i fall statutes relative to the proper and complete perforn	tion at the place in this capacity, nance of my dut

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			Chairtía Dahanta	
<b>■</b> Chairman	Name: Gary Peters	□ Chairman	Christie Roberts Name:	
□Vice Chairman	Address: 120 Maryland Ave NE	□Vice Chairman	Address:	
□Director	Washington, DC 20002	Director	Washington, DC 20002	
□President		President		
□Vice President		□Vice President		
□Secretary	Treasurer	□Secretary	☐ Treasurer	
□Other:	☐ Other:	□Other:	Other:	
□Chairman	Jessica Knight Henry	□Chairman	Laura Matthews Name:	
□Vice Chairman	Address: 120 Maryland Ave NE	□Vice Chairman	Address:	
□Director	Washington, DC 20002	Director	Washington, DC 20002	
□President		□President		
□Vice President		□Vice President		
<b>■</b> Secretary	Treasurer	☐ Secretary	☐ Treasurer	
□Other:	☐ Other:	□Other:	Other:	
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	120 Maryland Ave NE			
□ Director	Address:Washington, DC 20002	Director	Tital Cost.	
□President		□President		
□Vice President		□Vice President		
□Secretary	Treasurer	□Secretary	□Treasurer	
□Other:	Other:	□Other:	Other:	
Non-indexed indi	nt Notice: Use an attachment to report more the viduals may be added to the index when filing (Signature of Chairman, Vice Chairman, or aght	g your Florida Department o	of State Annual Report form.	
<u> </u>	(Typed or printed name and canacity	of person signing applicat	ion)	

Initial File #: 874714 Entity Type: Non-Profit Corporation

## GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF LICENSING AND CONSUMER PROTECTION CORPORATIONS DIVISION



**THIS IS TO CERTIFY** that all applicable provisions of the District of Columbia Business Organizations Code (Title 29) have been complied with and accordingly, this *CERTIFICATE OF GOOD STANDING* is hereby issued to

**DSCC** 

WE FURTHER CERTIFY that the domestic entity is formed under the law of the District on 12/21/1987: that all fees, and penalties owed to the District for entity filings collected through the Mayor have been paid and Payment is reflected in the records of the Mayor; The entity's most recent biennial report required by § 29-102.11 has been delivered for filing to the Mayor; and the entity has not been dissolved. This office does not have any information about the entity's business practices and financial standing and this certificate shall not be construed as the entity's endorsement.

**IN TESTIMONY WHEREOF** I have hereunto set my hand and caused the seal of this office to be affixed as of 4/30/2024 4:50 PM

CORPORATIONS DEVISION OF THE PROPERTY OF THE P

Muriel Bowser Mayor

Tracking #: U4iYLpOL

Business and Professional Licensing Administration

Rebecca Janovich

Superintendent of Corporations,

Corporations Division