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(Address)

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(City/State/Zip/Phone #)

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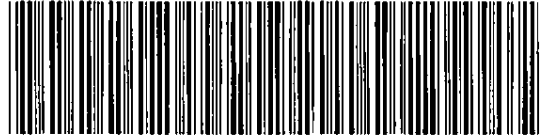
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T. LEMIEUX
DEC - 2 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLEMING FAMILY FOUNDATION 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:

Judith Hirschkom

Name of Person

Foundation Source

Firm/Company

209 Glencove Rd., Ste A, PMB 613

Address

Carle Place, NY 11514

City/State and Zip Code

statefilings@foundationsource.com

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

For further information concerning this matter, please call:

Judith Hirschkom

at (516) 870-7746

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. FLEMING FAMILY FOUNDATION

(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.)

FLEMING FAMILY FOUNDATION INC

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 87-2801597
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9/16/2021 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. c/o Foundation Source, 501 Silverside Rd., Ste 123, Wilmington, DE 19809
(Principal office street address)

(Current mailing address, if different)

8. charitable grantmaking
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

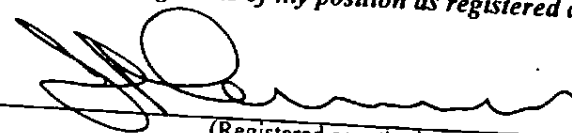
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: John Fleming

Office Address: 15700 Tropical Breeze Drive
Fort Myers, Florida 33908
(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. I 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.


(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.

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: John Fleming
☐ Vice Chairman Address: c/o Foundation Source
☒ Director 501 Silverside Rd., Ste 123
☒ President Wilmington, DE 19809
☐ Vice President _____
☐ Secretary _____ ☒ Treasurer _____
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Gavin Fleming
☐ Vice Chairman Address: c/o Foundation Source
☒ Director 501 Silverside Rd., Ste 123
☐ President Wilmington, DE 19809
☐ Vice President _____
☒ Secretary _____ ☐ Treasurer _____
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Nicola Fleming
☐ Vice Chairman Address: c/o Foundation Source
☒ Director 501 Silverside Rd., Ste 123
☐ President Wilmington, DE 19809
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Margaret Fleming
☐ Vice Chairman Address: c/o Foundation Source
☒ Director 501 Silverside Rd., Ste 123
☐ President Wilmington, DE 19809
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Kieran Fleming
☐ Vice Chairman Address: c/o Foundation Source
☒ Director 501 Silverside Rd., Ste 123
☐ President Wilmington, DE 19809
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Melissa Fleming
☐ Vice Chairman Address: c/o Foundation Source
☒ Director 501 Silverside Rd., Ste 123
☐ President Wilmington, DE 19809
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other: _____ ☐ Other: _____

*SEE ATTACHMENT FOR ADDITIONAL DIRECTORS

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

Fleming Family Foundation

Application By Foreign Not For Profit Corporation For Authorization To Conduct Its Affairs In Florida

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Declan Kiely, Director
c/o Foundation Source
501 Silverside Rd., Ste. 123
Wilmington, DE 19809

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FLEMING FAMILY FOUNDATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.



6239046 8300C

SR# 20243999359

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 204683791

Date: 10-21-24