F9500000911

TO: QUALIFICATION/REGISTRATION SECTION DIVISION OF CORPORATIONS

SUBJECT:	The Arthritis Foundation, Inc.	
	(Name of corporation)	
Dear Sir or Ma	dam:	
its Affairs in Flo	Application by Foreign Not For Profit Corporation for Authorizat rida", "Certificate of Existence", and check are submitted to regain nonprofit corporation to conduct its affairs in Florida.	tion to Conduct gister the above
Please return a	III correspondence concerning this matter to the following:	
	Firman W. Beckwith, Sr. V.b. (Name of Person) The Arthritis Foundation, Inc.	\ .
	(Firm/Company)	$J_{N}(x,y)$
	(Address) Atlanta, GA 10309	SECRET DWISCOND 95 FEB 1
	(City, State and Zip Code)	3 355
For further info	rmation concerning this matter, please call:	8 10 10 10 10 10 10 10 10 10 10 10 10 10
Lisa So	at (404) 872 - 7100 xx0	6214 ber

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallanassee, FL 32399 MAILING ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

1.60 JULE VOLT #F 1 (1956 270) - 0.7773 7 G - 501000 - 0000 - **** 76.77 - **** 76.75

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:

100	2011 A ry under the law of which it is inco	3	1 FEL number	, if applicable)		
3, <u>(749</u>		oerpetu.	a l	cease to exist o	r "perpet	ual 7
	N/A Date corporation first conducted all	fairs in Florida -	<u></u>	_	10	-
S	See sections 617.1501, 617.1502, a	and 817.155, F.S	.}			;
1414 So	ering St., NW, Atlanta, G	Λ 303.29		<u> </u>	ري دع دع	
(Current mailing address) To support research to find the cure for and prevention					:: <u>1</u>	
urnosals) of	corporation authorized in home st he quality of life for the	tate or country to	o be carried o	ut in the state of		
	d street address of Florida					
	CT Corporation Sy	ystem		_		
	(Nam 1200 South Pine Is					
	(Office ad	dress)				
	Plantation			_ , Florida ,	1324	_

io. Registered agents acceptance.

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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)
ALLAN FARNELL, ASSISTANT SECRETARY

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.

	lames and addresses of officers and/or directors: DIRECTORS	
A,	Chairman:	
	Address: Makemailite organization Majornalite Flaga.	
	Vice Chairman: Beland Bargerin, Ling.	
	Address: 6230 L. Drinceton Ave.	
	f.hqlewood, Co (O)10	
	Director: Raymond Snow	
	Address: Alex Brown & Bone, Inc., 222 Lakeview Acces	
	iite_1200, West_Palm_beach, F1 ; Ght_	_ 12
	Director:	57
	Address: Univ. of Cincinnati, Dept of Athletics.	771 - m
	Cincinnati_OR45241	(**) .
в.	OFFICERS	71
	President: Don L. Ringin Crossident & CEO	<u>.</u> .
	Address: _1414 Seging St ms	- <u>-</u> -
	Atlanta, 6A (0309)	
	Vice President: Pirman W. Bookwith, dr. Wr.	
	Address:	
	Atlanta, GA 30309	
	Secretary: Paul A. Pourant, Adat, Spc.	
	Address: 1314 Spring St., MW	
	<u> </u>	
	Treasurer:William Mulvihill	
	Address: Univ. of Cincinnati, Dept. of Athletics	
	Cincinnati, OH 45221	
NOT	If necessary, you may attach an addendum to the application listing additional officers and/o	or directors.
10	Mar Marith	
13.	Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14.	Firman W. Beckwith, Seni Vice President	
	(Typed or printed name and capacity of person signing application)	

Secretary of State
Corporations Division
Suite 315, West Comer
2 Martin Luther King Ir, Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 950240179
CONTROL NUMBER : 7813112
DATE INC/AUTH/FILED: 02/17/1978
JURISDICTION : GEORGIA
PRINT DATE : 01/24/1995
FORM NUMBER : 211

LISA SELLARS 1314 SPRING STREET ATLANTA GA 30309



CERTIFICATE OF EXISTENCE

I. MAX CLELAND, Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

THE ARTHRITIS FOUNDATION, INC. A DOMESTIC NONPROFIT CORPORATION

was formed in the jurisdiction stated above and was incorporated, formed, or authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution or certificate of cancellation with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Max Clolan

MAX CLELAND SECRETARY OF STATE

