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TRANSMITTAL LETTER

TO: Qualification/Registration Section
Division of Corporations

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-07/08/02--01056--002
*****78.75 *****78.75

SUBJECT: Marianist Province of the United States, Inc.
(Name of Corporation)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Martha M. Welch

(Name of Person)

Coolidge, Wall Wonsley & Lombard Co., L.P.A.

(Firm/Company)

33 W. First Street, Suite 600

(Address)

Dayton, OHIO 45402

(City, State and Zip Code)

For further information concerning this matter, please call:

Martha M. Welch

(Name of Person)

at (937) 449- - 5787

Area Code & Daytime Telephone Number

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☐ \$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

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STATE
TALLAHASSEE
FLORIDA
AL

**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. Marianist Province of the United States, 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.)
2. Missouri 3. 03-0415363
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 10, 2002 5. perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. July 1, 2002 (upon qualification)
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)
7. 4425 W. Pine Boulevard
St. Louis, MO 63108
(Current mailing address)
8. See attached
(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:

C T CORPORATION SYSTEM
(Name)
c/o C T CORPORATION SYSTEM, 1200 S. Pine Island Rd.,
(Office address)
Plantation Florida, 33324
(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.

C T CORPORATION SYSTEM

Carol Record
(Registered agent's signature)

**Carol Record
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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. **Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)**

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: see attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: see attached

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. James F. Fitz S.M.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

James F. Fitz, S.M. Vice President

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Attachment to Application by Foreign Not For Profit Corporation For Authorization to Conduct its Affairs in Florida – Marianist Province of the United States, a Missouri nonprofit corporation.

8. The purposes of the corporation authorized in its home state to be carried out in the State of Florida are:

The purposes for which the Corporation is formed and for which it shall exist is to be organized and operated exclusively for religious, charitable and educational purposes within the meaning of Section 501 (c) (3) of the Internal Revenue Code of 1986 (the "Code"). (As used herein, the Code shall be deemed to include all regulations promulgated thereunder and any corresponding provision of any future United States internal revenue law.) To the extent not inconsistent with the foregoing, the Corporation's purposes shall include, but not be limited to, the following:

- (a) To promote religion, morality, charity, the arts and other ministries.
- (b) To provide for the education of members of the Society of Mary.
- (c) To provide for the religious training, maintenance and care of members of the Society of Mary.
- (d) To establish, maintain and operate educational institutions.
- (e) To design, sponsor and operate educational programs, cultural activities, and community activities which are consistent with Christian and Marianist values.
- (f) To operate and fulfill any other purposes permitted by Chapter 355 of the Missouri Revised Statutes, as may be deemed appropriate by the Trustees of the Corporation, and to exercise any powers or rights now or hereafter conferred on not-for-profit corporations under the laws of the State of Missouri.

12A. The names and respective addresses of its directors/trustees are:

NAME	ADDRESS
Brother Stephen M. Glodek, S.M.	4425 West Pine Boulevard St. Louis, MO 63108
Father James Fitz, S.M.	4425 West Pine Boulevard St. Louis, MO 63108
Brother Richard Dix, S.M.	4425 West Pine Boulevard St. Louis, MO 63108
Father Timothy Dwyer, S.M.	4425 West Pine Boulevard St. Louis, MO 63108

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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 11/1/01 BY 60322 UCBAW/STP/FLORIDA

Father Timothy Kenney, S.M.

4425 West Pine Boulevard
St. Louis, MO 63108

Father Joseph Lackner, S.M.

4425 West Pine Boulevard
St. Louis, MO 63108

12B. The names and respective addresses of its officers are:

NAME	ADDRESS	OFFICE
Brother Stephen M. Glodek, S.M.	4425 West Pine Boulevard St. Louis, MO 63108	President
Father James Fitz, S.M.	4425 West Pine Boulevard St. Louis, MO 63108	Vice President
Brother Richard Dix, S.M.	4425 West Pine Boulevard St. Louis, MO 63108	Treasurer
Father Timothy Kenney, S.M.	4425 West Pine Boulevard St. Louis, MO 63108	Secretary

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CLERK OF DISTRICT COURT
ST. LOUIS, MO

No. N00069012

STATE OF MISSOURI



Matt Blunt
Secretary of State

CORPORATION DIVISION

CERTIFICATE OF CORPORATE GOOD STANDING

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02 JUL -8 PM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, MATT BLUNT, 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

MARIANIST PROVINCE OF THE UNITED STATES

was incorporated under the laws of this State on the 10th
day of APRIL, 2002, and is in good standing, having fully
complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my
hand and imprinted the GREAT SEAL of
the State of Missouri, on this, the
12th day of JUNE, 2002.

Matt Blunt

Secretary of State

