1a. The name, if different, which it elects t	to use in Rhode Is	land is:			
*If the corporate name is not available in I corporation will qualify and transact busin filed with this application.					* to be
2. It is incorporated under the laws of:	Arizona			2018	33c
3. The date of its incorporation is:	11/20/2014			SEP	RP OF
And the period of its duration is: CHECK	ONLY ONE BOX	•		դ-	₽ 26
▼ Perpetual (on-going)				P	200
Date certain for dissolution			 -	5:	STA
4. The address of its principal place of business is:					
3300 W Camelback Rd, Bldg 26,	Phoenix, AZ 8	35017			
5. The name and address of the initial reg	istered agent/offic	e in Rhode Island is:			
Agent Name InCorp Services, Inc.					
Street Address (NOT a P.O. Box) 222 Jefferson Blvd., S	uite 200				
City/Town Warwick		State RHODE ISLAND	Zip Code 02888	3	

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

SEP 0 4 2018

BY KL MSRYH

FORM 250 - Revised: 09/2017

6. The purpo	6. The purpose or purposes which it proposes to pursue in the conducting its affairs in Rhode Island:						
Provider of Post Secondary Education Services on an Arizona Traditional Ground Campus as							
well as Online.							
	Check the box to indicate an attachment						
7. The names and respective addresses of its directors and officers are:							
OFFICE	NAME		ADDRESS				
Director	Don Andorfer		3300 W Camelback Rd, Phoenix, AZ 85017				
Director	Jim Rice		3300 W Camelback Rd, Phoenix, AZ 85017				
Director	Will Gonzalez		3300 W Camelback Rd, Phoenix, AZ 85017				
President	Brian Mueller		3300 W Camelback Rd, Phoenix, AZ 85017				
Director	Fred Miller		3300 W Camelback Rd, Phoenix, AZ 85017				
Treasurer	Brian Roberts		3300 W Camelback Rd, Phoenix, AZ 85017				
Secretary	Brian Roberts		3300 W Camelback Rd, Phoenix, AZ 85017				
				x to indicate an attachment			
	8. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of this filing.						
Under penalty of perjury, we declare and affirm that we have examined this Application for Certificate of Authority, including and accompanying attachments, and that all statements contained herein are true and correct.							
Type or Print Name of President OR □ Vice President				Date			
Brian Mueller				8/24/2014			
Signature of President OR Vice President							
SIGN DOCUMENT HERE							
Type of Print	t Name of ■ Secretary OR □ Assista	ant Secreta	3ry	Date			
Brian Roberts				3/24/2018			
Signature of Secretary OR Assistant Secretary S:GN DOCUMENT HERE							

NC-SARA Institution List 08/28/18

Approved SARA Institutions in Arizona:

• Grand Canyon University





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

GRAND CANYON UNIVERSITY

ACC file number: 19665600

was incorporated under the laws of the State of Arizona on 11/20/2014;

That all annual reports owed to date by said corporation have been filed or delivered for filing, and all annual filing fees owed to date have been paid; and

That, according to the records of the Arizona Corporation Commission, said corporation is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. I have hereunto set my hand, affixed the official seal of the Arizona Corporation Commission, and issued this Certificate on this date: 07/27/2018

Ted Vogt, Executive Director



