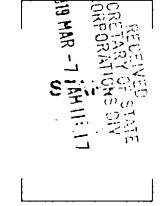
RI SOS Filing Number: 201988267700 Date: 3/7/2019 11:17:00 AM



Application for an Amended Certificate of Authority

FOREIGN Non-Profit Corporation

→ Filing Fee: \$25.00



Pursuant to the provisions of RIGL <u>7-6-82</u>, the undersigned foreign non-profit corporation hereby applies for an Amended Certificate of Authority to conduct affairs in the state of Rhode Island, and for that purpose submits the following statement: 2. The name of the corporation is: 1. Entity ID Number: Crohn's & Colitis Foundation of America, Inc. 24914 3. List the date the Certificate of Authority was issued by the RI Department of State: 07/27/1973 4. If the entity's name has changed, state the new name: Crohn's & Colitis Foundation, Inc. Check the box to indicate no change L 4a. The name, if different, which it elects to use in Rhode Island is: * If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application: 5. If the entity's purpose is changing complete the following section: *The new purpose should include ALL activity to be transacted in the State of Rhode Island.

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Check the box to indicate an attachment L

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

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Check the box to indicate no change

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6. Except as herein modified, the original Application for Certificate of Authority continues in full force and effect and is hereby confirmed, ratified and incorporated by reference into this Application for Amended Certificate of Authority.	
Under penalty of perjury, I declare and affirm that I have examined this Application for Amended Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.	
Type or Print Corporate Name of the Non-Profit Corporation	
Crohn's & Colitis Foundation, Inc.	
Type or Print Name of the ☑ President OR ☐ Vice President	Date
Michael Osso	July 09, 2018
Signature of President SIGN DOCUMENT HERE	
Type or Print Name of the ☐ Secretary OR ☐ Assistant Secretary Ronald Goldsman	June 29,2018
Signature of the Secretary OR Assistant Secretary SIGN DOCUMENT HERE	

TWO SIGNATURES ARE REQURIED

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of CROHN'S & COLITIS FOUNDATION, INC. was filed on 12/17/1965, under the name of FOUNDATION FOR RESEARCH IN ILEITIS, INC., as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment FOUNDATION FOR RESEARCH IN ILEITIS, INC., changing its name to FOUNDATION FOR ILEITIS AND COLITIS, INC., was filed 09/21/1967.

A Certificate of Amendment NATIONAL FOUNDATION FOR ILEITIS AND COLITIS, INC., changing its name to crown See Colitis Foundation of America, INC., was filed 11/15/1990.

A Certificate of Amendment Croun Standard Foundation OF AMERICA, INC., changing its name to Croun's a Content Foundation, INC., was filed 02/16/2017.

WITNESS my hand and the official seal of the Department of State at the City of Alhany, this 30th day of January two thousand and nineteen.

Whitney Clark

Deputy Secretary of State

Whomy Clark

RI SOS Filing Number: 201988267700 Date: 3/7/2019 11:17:00 AM



I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

March 07, 2019 11:17 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

