

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Certificate of Authority

FOREIGN Non-Profit Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL <u>7-6-74</u>, the undersigned foreign non-profit corporation hereby applies for a Certificate of Authority to conduct affairs in the State of Rhode Island, and for that purpose submits the following statement:

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purpose submits the following statement:				
1. The name of the corporation is: The lowa Democratic Party				
*If the corporate name is not available in Rhode Island, then corporation will qualify and transact business in Rhode Islanfiled with this application.	set forth below the fictitious name under which the d as stated in the "Fictitious Business Name Statement" to be			
It is incorporated under the laws of: lowa				
3. The date of its incorporation is: 02/19/1944				
And the period of its duration is: CHECK ONLY ONE BOX				
Perpetual (on-going)				
Date certain for dissolution				
4. The address of its principal place of business is:	 -			
5661 Fleur Drive, Des Moines, IA 50321				
5. The name and address of the initial registered agent/office	e in Rhode Island is:			
Agent Name Registered Agents Inc.				
Street Address (NOT a P.O. Box) 41 WOOT	Avc. Sutco			
City/Town Potallington	RHODE ISLAND Zip Code 028 Mg			

MAIL TO:

Division of Business Services 148 W River Street, Providence, Rhode Island 02904-2615

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

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6. The purpose or purposes which it proposes to pursue in the conducting its affairs in Rhode Island:				
Electing Democrats to office in lowa.				
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		Check the box to indicate an attachment		
7. The names	and respective addresses of its directors and o			
OFFICE	NAME	ADDRESS		
Director	N/A			
Director	N/A			
Director	N/A			
President	Mark Smith	5661 Fleur Drive, Des Moines, IA 50321		
Vice President	June Owens	5661 Fleur Drive, Des Moines, IA 50321		
Treasurer	Ken Sagar	5661 Fleur Drive, Des Moines, IA 50321		
Secretary	Don Ruby	5661 Fleur Drive, Des Moines, IA 50321		
Check the box 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.				
· · · · · · · · · · · · · · · · · · ·	Name of ☑ President OR ☐ Vice President	Date		
Mark Smith				
Signature of President OR Vice President SIGN DOCUMENT HERE				
Type of Print	ame of 🖪 Secretary OR 🔲 Assistant Secreta	Date		
Don Ruby				
Signature of Secretary OR Assistant Secretary SIGN DOCUMENT HERE				

IOWA SECRETARY OF STATE PAUL D. PATE



CERTIFICATE OF EXISTENCE

Issue Date: 8/3/2020

Name: THE IOWA DEMOCRATIC PARTY. (504RDN - 76250)

Date of Incorporation 2/19/1944

Duration: PERPETUAL

I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the nonprofit corporation named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees required under the Revised Iowa Nonprofit Corporation Act due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State
- d. Articles of dissolution have not been filed.

Certificate ID CS198916

To validate certificates visit sos.iowa.gov/ValidateCertificate

Paul D. Pate, Iowa Secretary of State