



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 7-6-74, 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:

1. The name of the corporation is:		
Share Winter Foundation		
1a. 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 qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application.		
2. It is incorporated under the laws of:		
Illinois		
3. The date of its incorporation is:		
8/2/2011		
And the period of its duration is. CHECK ONLY ONE BOX		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
4. The address of its principal place of business is:		
C/O Constance Beverley 385 Westminster Street #2D, Providence, RI 02903		
5. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name		
Constance Beverley		
Street Address (NOT a P.O. Box)		
385 Westminster St. #2D		
City/Town	State	Zip Code
Providence	RHODE ISLAND	02903

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

OCT 26 2020

 BY: *[Signature]* P 5E 52G
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FORM 250 - Revised 09/2017

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 R.I. DEPT. OF STATE
 BUS. SVCS. DIV.
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6. The purpose or purposes which it proposes to pursue in the conducting its affairs in Rhode Island

Advocate for winter sports within urban and suburban communities throughout the United States, to improve the health and fitness of urban and suburban youth through access and participation, to increase and sustain that participation, and to provide resources, financial best practices and collaboration opportunities to organizations that deliver winter sport activities to those communities

Check the box to indicate an attachment ☐

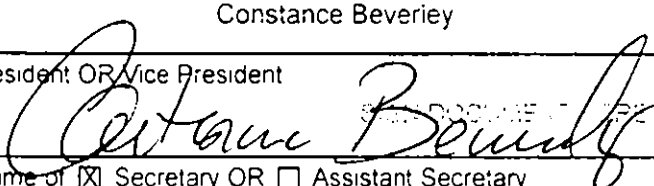
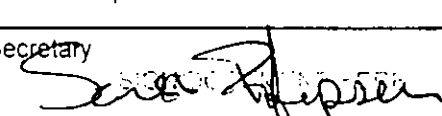
7. The names and respective addresses of its directors and officers are

OFFICE	NAME	ADDRESS
Director	Richard Coe	C/O Constance Beverley 385 Westminster Street #2D, Providence, RI 02903
Director	Phill Gross	C/O Constance Beverley 385 Westminster Street #2D, Providence, RI 02903
Director	David Ingemie	C/O Constance Beverley 385 Westminster Street #2D, Providence, RI 02903
President	Constance Beverley	C/O Constance Beverley 385 Westminster Street #2D, Providence, RI 02903
Vice President		
Treasurer	Jean Brown	C/O Constance Beverley 385 Westminster Street #2D, Providence, RI 02903
Secretary	Sara Pflipsen	C/O Constance Beverley 385 Westminster Street #2D, Providence, RI 02903

Check the box to indicate an attachment ☐

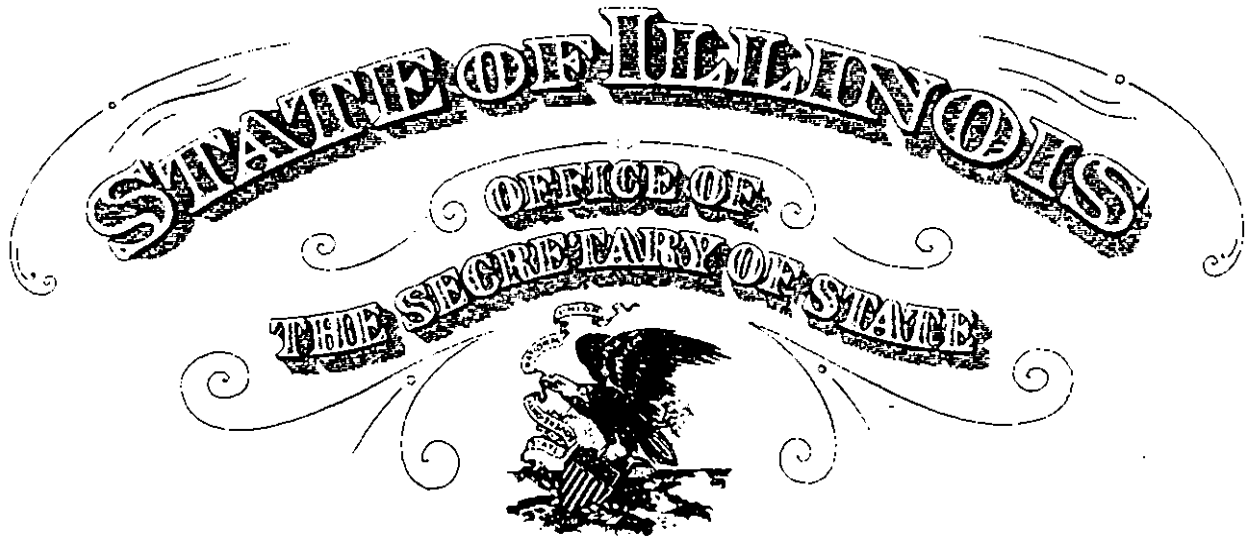
8. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing

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 <input checked="" type="checkbox"/> President OR <input type="checkbox"/> Vice President Constance Beverley	Date 10/20/20
Signature of President OR Vice President 	
Type or Print Name of <input checked="" type="checkbox"/> Secretary OR <input type="checkbox"/> Assistant Secretary Sara Pflipsen	Date 10/20/20
Signature of Secretary OR Assistant Secretary 	

File Number

6804-659-9



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

SHARE WINTER FOUNDATION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON AUGUST 02, 2011, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this 22ND
day of OCTOBER A.D. 2020 .

Jesse White

SECRETARY OF STATE

Authentication # 2029601918 verifiable until 10/22/2021

Authenticate at <http://www.cyberdriveillinois.com>



State of Rhode Island

Department of State | Office of the Secretary of State

Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,
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:

October 26, 2020 03:53 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

